



Minter Field Airport District

California Aeronautical University
AeroCamp 2018

SCHOLARSHIP APPLICATION

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State Zip Code

Phone: _____ Email: _____

Education

School: _____ Address: _____

GPA: _____

School Activities:

Community Services Activities:

Honors/Awards Received:

References

Please list two references.

Full Name: _____ Relationship: _____

Phone: _____

Full Name: _____ Relationship: _____

Phone: _____

Signatures

Applicant's Signature _____ Date: _____

Parent/Guardian Signature _____ Date: _____