



Eastern Idaho 99s Final Approach Checkride Scholarship Guidelines

The Eastern Idaho Chapter of the Ninety-Nines offers checkride scholarships to qualifying applicants. Scholarships are awarded annually as long as funds are available. We welcome donations for this scholarship fund.

Requirements and Eligibility:

Eastern Idaho, Final Approach Checkride Scholarship:

This scholarship is to provide women who live within the Eastern Idaho region and are pursuing any new certificate or rating, with funding towards their checkride. To be eligible, applicants must:

1. Live within a 99 nm radius of the PIH VOR or within Eastern Idaho
2. Have the required written test completed if applicable

Amount to be Awarded up to: \$1000.00. Funding is provided for a checkride completed within six months after the date funds are awarded and are paid as a reimbursement to the applicant upon submission of an invoice (signed by the applicant and DPE) to the Eastern Idaho 99s Treasurer. If funds are not used within 6 months of being awarded, the applicant may formally request a one-time, 6-month extension to be granted at the discretion of the EI Scholarship Committee. The applicant that is granted the scholarship will also be granted one year of membership with the EI99's at no cost.

APPLICATION PACKET CHECKLIST

Application packages must include the following items:

- ☐ Completed application form.
- ☐ One letter of recommendation from the applicant's flight instructor:
 - ***NOTE: It is highly recommended that you submit an additional letter of recommendation.*** We suggest a letter of personal recommendation by an individual who can describe the applicant's character and experience in areas other than aviation OR one from a member of the Ninety-Nines
- ☐ Copy of Airmen Certificate(s) *(pertinent to prove eligibility to pursue certificate/rating)*
- ☐ Copy of FAA Medical Certificate.
- ☐ Budget Statement (See application)
- ☐ Copy of Logbook - last 3 pages
- ☐ Personal Statement Summary. (2-page max, See application)

Submissions are due by 11:59pm MDT on May 1st, 2025. Email to: easternidaho99s+scholarships@gmail.com. Please ensure all application items listed are included in one (1) pdf file.

The winner will be notified by email no later than May 9th, 2025, and will be required to abide by all scholarship rules and provide updates to the scholarship committee upon request.



Eastern Idaho 99s Final Approach Checkride Scholarship Application

Please read this application carefully and be sure you have met ALL criteria and are prepared to complete all requirements. Incomplete applications (including missing supporting documents) will be disqualified.

BACKGROUND INFORMATION

Name: _____ E-mail address: _____
Address: _____ Phone: _____
Occupation: _____ Employer: _____
Highest Level of Education Completed: _____
For High School Students, High School Name: _____
Classification: _____ Current GPA: _____ Graduation Date: _____

Certificate or Rating applying for: _____

AVIATION HISTORY

Flight School Name: _____

Flight School Address: _____

Total Flight Hours: _____ Total PIC: _____

Hours in last 90 days: _____

Certificate/Rating Held: Date Issued:

If you have a degree or any special training in aviation, please list:

Budget Statement

Name: _____

How far have you progressed in your flight training?

My first flight lesson towards this certificate/rating was on (date): _____

I am enrolled in, or have completed ground school..... ☐

Course name/location: _____

I have completed at least one flight requirement toward the rating/certificate..... ☐

I have passed the written exam, score: _____ ☐

I have started check-ride prep..... ☐

How much more do you believe it will cost for you to complete your certificate or rating? Fill in the blanks below to estimate the total amount needed to complete your initial training.

Study and test prep materials, please list: _____ \$ _____

Additional ground instruction still needed: _____ hours at \$ _____ per hour = \$ _____

Aircraft rental time with flight instructor: _____ hours at \$ _____ per hour = \$ _____

Solo aircraft rental time: _____ hours at \$ _____ per hour = \$ _____

Examiner check-ride fee: \$ _____ Any other additional costs you foresee, please list:

_____ \$ _____ **TOTAL \$** _____

How do you plan to pay for your checkride if you are not awarded this scholarship?

When do you plan on completing your training, do you have a checkride scheduled?

How have you financed your training so far?

Applicant Signature _____ Date _____

Instructor Signature _____ Date _____

Personal Statement Summary

(Please include your statement in your PDF application)

Please your response to the following in two pages MAX:

- a. Your personal interests?
- b. General, career, and aviation goals & why you want this rating or certificate?
- c. What sparked your initial interest in aviation?
- d. Aviation-related activities in which you have participated (including employment) that mean the most to you.
- e. Any obstacles you have had to overcome to start in and to continue in flying?
- f. How will you fund the rest of your training towards this rating or certificate?
- g. How have you contributed to the Ninety-Nines and/or the aviation community in general?
- h. Do you currently have a mentor?

CFI Recommendation Form

(Limit your response to the space provided below)

Please include at least the following elements: How do you know the applicant, for how long, and how well?
Be specific. Describe the applicant's work ethic and character. Why do you recommend them for this award?

Applicant Name:

CFI Name:

CFI Email:

CFI Signature & Date:



DECLARATION AND AGREEMENTS

I understand this scholarship is to be used only for which this application is submitted. I understand the funds from this scholarship can be used to cover a checkride for up to six months from the date of award. In addition, if I obtain my rating or certificate without using the entire scholarship, the remaining funds will not be disbursed.

I certify that all information in this application is true and correct.

_____ Applicant Printed Name

Parent/Guardian Printed Name (If under 18)

_____ Applicant Signature

_____ Parent/Guardian Signature

DISCLAIMER:

Neither the Eastern Idaho Chapter of the Ninety-Nines, Inc., The Ninety-Nines, Inc., nor their members, agents, or representatives are responsible for the quality of any training received with this scholarship, nor for any accident, incident, or any other event which may occur while the recipient of this scholarship is performing flight training or activities relating thereto; and recipient agrees to sign a hold-harmless agreement in favor of said entities upon receipt of the scholarship and before any flight or training is made. I hereby release The Ninety-Nines and any of its affiliated organizations from all actions, claims or demands that I, my assignees, heirs, distributes, guardians, and legal representatives now have or may hereafter have for injury or damage resulting from my participation in any activities related to this scholarship.

I agree to abide by all the terms and conditions specified in this application. I declare under penalty of perjury that the information I have given here is true and correct and that I meet the eligibility requirement for the scholarship sought.

_____ Applicant Printed Name Parent/Guardian

Printed Name (If under 18)

_____ Applicant Signature

_____ Parent/Guardian Signature