## APPLICATION FOR THE MID KOLSTAD SCHOLARSHIP

Administered by the Women Soaring Pilots Association

NamePhone (area code)					
Address					
	Street	City	State	Zip	
Cell Pho	ne	e-mail			
Pilot Certificate #		SSA #	Date of Birt	Date of Birth	
(can be	a Student Pilot Certificate	)			
flew wit This scho	h the Air Hoppers Club in olarship is open to women te or add-on rating. Appl	e became interested in flying New Jersey and at the Black nover the age of 25 to help picants must be members of NJ.S. The scholarship is for \$1	Forest Glider Port in pay for lessons towar WSPA and SSA or an e	Colorado. d a Private Glider equivalent	
Informa	tion submitted must shov	v a commitment to soaring.	Submit this form and	the following items:	
2. 3. 4. 5. 6.	gliders and how this schoon A Photo, preferably with a A copy of your pilot certif A copy of your latest entrollary other evidence that in the name and address of	less explaining your goals an larship will help you meet yo an aircraft – no sun glasses, picate (front and back).  y in your logbook showing you ndicates you meet the require the glider port where you plone, photo, essay, and biogra	our goals.  please.  pur total time/flights.  rements of this schola  an to take your traini	arship. ng.	
publicity	y, and public relations pur	poses.			
		Signa	ture	Date	
If you ha	ave questions, contact Phy	yllis Wells at 719-372-0410 o	r pwells1634@aol.co	m	

Phyllis Wells, 1938 15<sup>th</sup> Street, Penrose CO 81240

Applications must be received by May 15. No e-mail applications accepted. Mail application to: