



The AAE Foundation Scholarship Program

Endorsed By An A.A.E.

Sponsored by the American Association of Airport Executives

1. Please print or type all information.
2. If space provided is inadequate, please attach additional papers to the application.
3. School, community, and work experience relate only to the last 4 years.
4. All data you submit in support of this application becomes the property of Scholarship Managers (SM).
5. Please note that you may only be a recipient in one (1) AAE sponsored scholarship program. You may apply for multiple programs, but if you are selected in one program you will not be eligible to be a recipient in the other programs

AAE DATA: I am sponsoring the applicant whose information is in the **Applicant Data** section that follows.

AAAE Member # Email _____

First Name _____ Last Name _____ MI _____

Street Address _____ City _____ State _____ Zip Code _____

Home Tel # ---- Region _____

Signature of AAE _____
Date _____

APPLICANT DATA: Male Female Mr. Ms. Miss. Mrs.

First Name _____ Last Name _____ MI _____

Street Address _____ City _____ State _____ Zip Code _____

Home Tel # ---- Email _____

HIGH SCHOOL DATA:

6 digit code May be found at www.actstudent.org/regist/lookups

Cumulative, unweighted GPA (on a 4.0 basis) – must be converted from letter or numerical grades. .

Anticipated Graduation Date: Month Year

Name _____

Street Address _____ Tel # ----

City _____ State _____ Zip Code _____ - _____

Principal's Name _____ Email _____

COLLEGE DATA:

Cumulative GPA (on a 4.0 basis) Must be converted from letter or numerical grades. .

Please list the undergraduate US college/school you attend or plan to attend

Name _____ City _____ State _____ Zip Code _____ - _____

Major _____ Degree AA BA BS

Anticipated Graduation Date: Month Year

School & Community Activities: Please list all school and community activities (for the past 4 years only).

Activity	Years	Honors/Awards	Activity	Years	Honors/Awards

Work Experience: Please list all work experience, part- and full-time (for the last 4 years only).

Position	from mo/yr	to mo/yr	hrs per wk	Position	from mo/yr	to mo/yr	hrs per wk

Personal Statement: On a separate sheet of 8X10 paper please state your educational goals and how they relate to your career goals. This statement must be typed, printed, or computer-generated.

Projected Annual Parent Aid (PAPA): This financial data section must be completed in it's entirety to fulfill the requirements of scholarship application. Data must be from the IRS form which contains income data for the current fiscal year (forms to be filed/submitted by April 15). **Please note that the income figures are for the parents, NOT the applicant.**

Adjusted gross income \$ _____

Untaxed income, AFDC, ADC, other \$ _____

Federal income tax **paid** (not withheld) \$ _____

Unreimbursed medical expenses \$ _____

Income earned by mother \$ _____ (It is beneficial to enter the mother and the

Income earned by father \$ _____ father's income separately)

Cash, Savings, CD's, stocks, bonds, etc. \$ _____

Amount of known grants, scholarships, or other financial aid \$ _____

Number of family members attending college at least 1/2 time during the coming school year _____

Number of exemptions claimed on IRS forms (1040, 1040A, 1040EZ) _____

Do not enter any information that relates to 401K, IRA, Roth IRA, Social Security, SEP, or any other type of retirement income.

AFFIDAVIT: The signature below affirms that all the information provided in this application, and supporting documents, is true and complete to the best of my knowledge. If requested, I will provide proof. Failure to provide this proof shall invalidate this application and result in termination of any aid granted.

Signature of applicant Date

Your request for aid becomes valid ONLY when this application & all supporting documents are submitted to:

**The AAE Foundation Scholarship Program
Scholarship Managers
PO Box 2810
Cherry Hill, NJ 08034**

POSTMARKED NO LATER THAN MARCH 31, 2017

The form and format of this application is protected by copyright. It is the sole possession of Scholarship Managers (SM), a division of Career Opportunities Through Education, Inc. (Coté). Please direct queries to the address above, or: CALL (856) 616-9311 FAX (856) 616-9711 email scholarshipmanagers@scholarshipmanagers.com