

APPLICATION FOR THE FLORIDA INSTITUTE OF TECHNOLOGY B.S. OR M.S. IN AVIATION MANAGEMENT PROGRAM

Deadline for Application: Aug. 1, 2025

Applicant Criteria:

- Scholarship applicants must explain financial need.
- Should be a high school graduate or already enrolled in a two- or four-year aviation program with a pilot training component.
- Provide two letters of recommendation (from teachers, mentors or employers).
- Write an essay.

Application Requirements & Procedures:

- Submit a completed application form by Aug. 1, 2025 (if handwritten, please write legibly).
- Provide two letters of recommendation.
- Submit school transcripts.
- Enclose a written essay on "What sparks your interest in the field of aviation and what are your goals when you complete the program?"
- Mail application to: Office of Financial Aid, Florida Tech, 150 W. University Blvd., Melbourne, FL 32901

PERSONAL INFORMATION

Full Name _____

Address _____

City _____ State _____ ZIP _____

Mailing Address _____

City _____ State _____ ZIP _____

Phone Number _____ Email _____

Birth Date _____ Place of Birth _____

GENERAL INFORMATION

High School Graduate? ☐ Yes ☐ No GPA _____

If yes, name of high school _____ If no, do you have a GED certificate? ☐ Yes ☐ No

Note: A copy of a high school transcript or GED certificate must be included with this application.

Are you a U.S. veteran? ☐ Yes ☐ No Dates of Service _____

EDUCATIONAL BACKGROUND

School Name (Elementary, Middle & High)	Years Attended	Extracurricular Activities, Awards or Recognition

WORK EXPERIENCE

Company Name & Location	Dates Employed	Job Title & Duties

VOLUNTEERING

Organization & Location	Dates of Service	Describe Activities

HOBBIES & INTERESTS

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Tell us how receiving this scholarship money will impact your ability to attend Florida Tech and achieve your goals. (Please handwritten response or provide as separate page).

I hereby certify that the information provided by me in this application is truthful, complete and accurate. I understand that applications will not be returned.

Applicant Signature _____

Date _____

Parent Signature _____
(if under 18 years of age)

Date _____