

Colonel James L. Graham, Jr. Memorial Aviation Scholarship

APPLICANT INFORMATION

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ E-mail: _____

SUBMISSION CHECKLIST (Check each item submitted)

- Two Letters of Recommendation
- Most recent certified transcript
- Essay
- List of Extra Curricular Activities (Jobs, Volunteer Work, Clubs)
- Medical Certificate and Flight Training Intent Statement
- Date/place of Young Eagle Flight, if applicable _____

I certify that all the information shown above and attached to this application is accurate.

Applicant signature _____ Date _____

Parent/Guardian signature _____ Date _____
(If applicable)

Please mail this cover sheet/application form with attachments to arrive no later than
October 15, 2018 to:

Virginia Aviation Business Association
Attn: Graham Memorial Aviation Scholarship
1011 E. Main Street, Suite 400
Richmond, Virginia 23219

