



PROFESSIONAL PILOT ADMISSION APPLICATION
\$20 Application Fee required

I have applied and been accepted to Atlantic Cape and have declared the Professional Pilot Option in Aviation Studies as my major.

PLEASE PRINT CLEARLY

Personal Information:

*(*for reporting purposes only)*

CWID/SS#: _____ Gender:* _____ Ethnicity:* _____

Term of Entry: Fall ____ Spring ____ Summer ____ Date of Birth: _____

Name: _____

Address: _____

City _____ State _____ Zip _____

Daytime Phone: _____ County of Residence: _____

(attach copy of driver's license)

Email Address: _____

Military Service:

Have you served in the US Armed Forces? Yes No Are you a Veteran? Yes No

Service Branch Dates Specialty Highest Rank

Did you receive an Honorable Discharge? Yes No

Selective Service: Have you registered for Selective Service? Yes No

Criminal History:

Please answer the following questions. If you answered YES to any of these questions, please provide additional details (date, location, charges, and penalties) on a separate page.

1. Have you ever been convicted of a misdemeanor or felony? Yes No
2. Have you ever been convicted of driving while intoxicated? Yes No
3. Have you ever had your driver's license suspended or revoked? Yes No

Aviation Experience:

Have you ever been employed in the aviation industry? Yes No
If YES, please list your two most recent employers:

Company	City	State	Position	Dates
Company	City	State	Position	Dates

Do you hold any FAA pilot certificates? Yes No

Sport Recreational Private Instrument Commercial ATP

Indicate total flight time: _____

Terms and Conditions for Pilot Training:

Candidates for Atlantic Cape Community College’s Professional Pilot program must meet the FAA standards prior to receiving pilot training. These include the following:

1. You must be a US Citizen (copy of passport OR copy of birth certificate AND other government-issued photo id). **Copies must be submitted with application.**
2. Non-US Citizens must submit to the TSA approval process
3. You must speak English clearly.
4. You must meet FAA medical standards for a Class II medical certificate. **Copy of medical certificate must be attached to application.**
5. You must pass a security background investigation.

Signature (Required of all Applicants):

1. I understand the Terms and Conditions listed above.
2. I understand that graduation from the Atlantic Cape Professional Pilot program does not
3. guarantee employment.
4. I hereby permit Atlantic Cape to release my personal and academic records as necessary to
5. verify my completion of the program requirements.
6. The information that I have provided is true and correct to the best of my knowledge. I acknowledge that any intentional falsification will result in immediate dismissal from the program.

_____	_____	_____	_____	_____
Applicant Signature	Date	App Fee Received	ADM Rep.	Date

Atlantic Cape does not discriminate in admission or access to its programs and activities on the basis of race/color, national origin, religion/creed, disability, age, marital status, gender or sexual orientation.

Incomplete applications will not be accepted