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**Squadron 2 Flight School**

2655 Robert Fowler Way, San Jose, CA, 95148 408-648-2008

E-Mail: **141@squadron2.com**

**APPLICATION FOR ADMISSION**

**Personal Information**

Last (Surname) Name:

First (Given) Name:

Passport Name:

Passport #:

Date of Birth (MM-DD-Year):

Country of Birth:

Country OF Citizenship:

Gender: [ ] Male/[ ] Female

Height in Inches:

Weight in lbs:

**Foreign Address (in your country)**

Street and building:

City:

Province/Territory:

Postal Code:

Country:

**US Address (If you have one)**

Street and building:

City:

Province/Territory:

Postal Code:

Country:

Email Address:

Telephone (Country Code – phone number with no spaces or dashes or dots)

 Home:

 Cell:

 US:

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Requested Program Start Date:

Education Level:

Flight Experience (if any):

English Proficiency (See note 4): [ ] Fluent/ [ ] Good/ [ ] Fair/ [ ] Poor\*/ [ ] None\*

Student Personal Funds (See Note 1):

Bank Loan Amount:

Living Expenses (Recommend minimum 5000/year):

**Course Requested (check all that apply)**

[ ] Professional course (Private, Instrument, and Commercial SEL)

[ ] Private [ ] Instrument [ ] Commercial [ ] Multi Engine add-on

[ ] Ground Instructor [ ] Flight Instructor (CFI)

[ ] Instrument Flight instructor (CFII)

**Emergency Contact Information**

Name:

Address-Street and building:

City:

Province/Territory:

Postal Code:

Country:

Relation:

**Dependent Data**

Last (Surname) Name:

First (Given) Name:

Passport Name:

Passport #:

Date of Birth (MM-DD-Year):

Country of Birth:

Country OF Citizenship:

Gender: [ ] Male/[ ] Female

Relation:

**NOTES**

1. Please supply a bank statement for proof that you have sufficient funds to complete the course.
2. All applicants must enclose a $125 processing fee, not including postage.
3. Please do not send cash or foreign currency. PayPal is accepted, PayPal address is c.conrad1@mindspring.com
4. English proficiency of poor or none will require a special English class. Please contact us to setup this training.