

# JB Aeronautics Enrollment Application

## Personal Information

1. Full legal name \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
Last First Middle
2. Address \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
Street City Zip
3. Phone \_\_\_\_\_ Cell \_\_\_\_\_
4. Email Address \_\_\_\_\_
5. Citizenship:  USA  Other \_\_\_\_\_
6. Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_  
Name
7. Highest Education Completed:  High School  College \_\_\_\_\_

## Flight Information (If applicable)

1. FAA Pilot Certificate:  None  Student  Private  Com  ATP
2. Date of Issue: \_\_\_\_\_ Certificate No. \_\_\_\_\_
3. Ratings Held:  ASEL  AMEL  Instrument  Helicopter
4. Medical Certificate:  None  FAA Class \_\_\_\_\_ Date \_\_\_\_\_
5. Flight Experience:  None Total Time \_\_\_\_\_ PIC \_\_\_\_\_  
PIC XC \_\_\_\_\_ Instrument \_\_\_\_\_ Retract \_\_\_\_\_ Simulator \_\_\_\_\_

## Course Information

1. Course/s Requested:  Private  Com  Instrument  Multi  CFI
2. Proposed Start Date: \_\_\_\_\_
3. Lesson Availability and Frequency \_\_\_\_\_