



**Please read this note before filling out this application.**

Prior to issuing a letter of acceptance, a \$1,000 CAD deposit must be paid. It will be applied to the final phase of the program. All training costs are subject to Canadian taxes and fuel surcharges and will vary slightly depending on the student's individual progress. Room and board as well as transportation to and within Canada is at student's cost. Students may wish to temporarily acquire a vehicle to better enjoy the surrounding communities. Please contact us for further details before submitting your application.

### Application/ Information Form

#### Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First*

Address: \_\_\_\_\_  
*Street Address City/ Country*

Start Date: \_\_\_\_\_ Citizenship: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Occupation: \_\_\_\_\_ Male  Female

Emergency Contact Information:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone Number: \_\_\_\_\_

#### Education

High School: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Diploma: \_\_\_\_\_

College: \_\_\_\_\_ Address: \_\_\_\_\_

#### Flight Training Experience

Licences/ Ratings held: \_\_\_\_\_ Total Dual: \_\_\_\_\_

Licence Number: \_\_\_\_\_ Date of the last Medical: (DD/MM/YY) \_\_\_\_\_

Flight Training Unit Attended: \_\_\_\_\_ Total Solo: \_\_\_\_\_

#### Desired Training (check courses in which you wish to enroll)

Primary Training Location: CYPK – Pitt Meadows Airport

**Integrated Airline Transport Pilot Licence**  **Flight Instructor Rating Program**

#### Signature

I certify that my answers are true and complete to the best of my knowledge.

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Date: \_\_\_\_\_