



Ruth Frantz Memorial Scholarship and Chicago Area Chapter of The Ninety-Nines Scholarship

The Ruth Frantz Memorial Scholarship offers two \$2,500 scholarships and the Chicago Area Chapter of The Ninety-Nines Scholarship offers one \$500 scholarship to members of the Chicago Area Chapter of The Ninety-Nines.

The scholarships are to be used to assist a member of Chicago Area Chapter of The Ninety-Nines in the completion of an aviation goal.

Applicants must submit three (3) copies of the completed and signed application postmarked no later than April 1, 2021. Applicants must be a member of The Ninety-Nines, Inc. and the Chicago Area Chapter of The Ninety-Nines for a minimum of four months at April 1, 2021. Applicants will be notified of their status as soon as possible but no later than April 30, 2021.

Funds are to be used within one year of the award date. By signing the form, the applicant agrees to provide copies of logbook entries showing that the funds were used for the purpose requested; and agrees to allow the announcement of her achievement in the Chicago Area Chapter of The Ninety-Nines newsletter or other media.

**Ruth Frantz Memorial Scholarship
and
Chicago Area Chapter of The Ninety-Nines Scholarship
Application**

Name _____ email: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ (_____) _____

How will you use the funds? _____

Please attach an essay (essay may not exceed one page, one side only) and include at least the following elements:

1. Tell us about yourself, your activities in aviation, and participation in The Ninety-Nines. Be specific.
2. Describe your goals in aviation or aerospace, and opportunities. Tell us what you have already accomplished in pursuit of these goals, pertinent to specific certificate/rating sought. Why are you seeking this specific training? How will it help you to qualify for or to advance in an aviation-related profession or charitable cause?
3. Tell us how you have financed your training and education so far. Make a statement of financial need for completion of this training.

The completed application must include:

1. This signed application form.
2. Essay.
3. A letter of reference.

SIGNATURE FORM

Print full name: _____

Signature of Applicant _____ Date _____

Return three (3) copies of the Application and attachments to:

**Chicago Area Chapter of The Ninety-Nines
Dr. Debbie Karas
(see Ninety-Nines Directory for address)**

APPLICATION MUST BE POSTMARKED NO LATER THAN APRIL 1, 2021