

**2022 ROBERT SHELTON & HARSH MODI SCHOLARSHIP APPLICATION.**

\_\_\_\_\_  
Last Name                      First                      Middle

\_\_\_\_\_  
Pilot Certificate Number

\_\_\_\_\_  
Present Street Address                      City      State      Zip

\_\_\_\_\_  
Home Telephone Number

\_\_\_\_\_  
Permanent Street Address                      City      State      Zip

\_\_\_\_\_  
Birth Date and Place

\_\_\_\_\_  
E-mail Address

\_\_\_\_\_  
Cell or another Phone Number

\_\_\_\_\_  
Applicant's Employee & Supervisor

\_\_\_\_\_  
Supervisor's Position

Average Number of hours worked per week \_\_\_\_\_

\_\_\_\_\_  
Employer's Address

\_\_\_\_\_  
Employer's Phone Number

\_\_\_\_\_  
If under 18 yr., Full name of Parent/Legal Guardian

\_\_\_\_\_  
Relationship

\_\_\_\_\_  
Address of the above referenced individual

\_\_\_\_\_  
Telephone Number

**FAA Certificates:** List all certificates, including dates received and type of aircraft flown Include copies of all pilot certificates, BFR, endorsements and copies of the last 2 pages of activity from logbook.

\_\_\_\_\_

Total Time \_\_\_\_\_ PIC \_\_\_\_\_ Dual \_\_\_\_\_ within Last 6 Months \_\_\_\_\_

**Education Background:**

Highest Academic Degree \_\_\_\_\_

Name of Academic Institution \_\_\_\_\_

Graduation date (or expected graduation) \_\_\_\_\_ Students: # of hours per term \_\_\_\_\_

Include copies of diploma or transcripts.

Written Exam score and date passed for commercial rating \_\_\_\_\_

**FLORIDA GOLDCOAST CHAPTER 99s**  
**ROBERT SHELTON & HARSH MODI SCHOLARSHIP APPLICATION.**

I certify that I am a current member of the Ninety-Nines, Friend of the Ninety-Nines or Veteran

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If Member of the Ninety-Nines International Women’s Pilot Organization indicate chapter affiliation

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Neither the Florida Goldcoast Chapter of the Ninety-Nines, Inc., its members, agents or representatives, are responsible for, nor liable for, the quality of any training, incident, or any other event which may occur while the recipient of the Robert Shelton & Harsh Modi Scholarship in performing training or activities relating thereto.

The applicant signature below indicates agreement to this disclaimer and declares that the information given in this application is true and correct. The applicant understands that this Scholarship will only be used for the purpose for which the applicant is applying.

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Signature

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Date

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Print Name

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If under 18 years of age, signature of parent or legal guardian

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Print Name

**To apply, please complete this form and email it to [flynlowe@comcast.net](mailto:flynlowe@comcast.net) by October 15, 2022.**

**Robert Shelton & Harsh Modi Scholarship Application**

LETTER OF RECOMMENDATION FORM

NAME OF THE APPLICANT \_\_\_\_\_

The above applicant is applying for above 99s Chapter Scholarship. We would request that you complete this form and email it by 15 October 2022 to:

Kimberly Lowe  
[flynlowe@comcast.net](mailto:flynlowe@comcast.net)

1. How long have you known this applicant and in what capacity?

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2. How would applicant utilize this scholarship successfully, if awarded?

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3. Relationship to Applicant.

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4. Tell us in your own words why she should be considered as a candidate for this scholarship. We consider your opinion an important part of the selection process.  
(Add additional pages to your comments as needed)

YOUR NAME \_\_\_\_\_ PHONE \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**ROBERT SHELTON & HARSH MODI SCHOLARSHIP APPLICATION.**

**Offered through**

**FLORIDA GOLDCOAST CHAPTER OF THE NINETY-NINES SCHOLARSHIP PROGRAM**

**CERTIFICATION**

NAME OF THE APPLICANT \_\_\_\_\_

If I receive this scholarship, I will schedule and complete the written tests within one year after the date of receipt of the award. I also understand that I will be required to attend the Florida Goldcoast Chapter of the 99s, Scholarship Awards and Holiday party, to be presented with this Scholarship award by a representative of the Robert Shelton & Harsh Modi Scholarship.

SIGNED \_\_\_\_\_ DATE \_\_\_\_\_

**FLORIDA GOLDCOAST CHAPTER NINETY-NINES HOLD HARMLESS AGREEMENT  
FOR THE SCHOLARSHIP APPLICANT.**

Neither the Florida Goldcoast Chapter of the Ninety-Nines, Inc., or the South East Section of the Ninety-Nines, Inc., The Ninety-Nines, Inc., Pilot Training Center Homestead, Yogini Modi and Bryan Shelton, nor their members, agents, or representatives are responsible for the quality of any training received with this scholarship, or for any accident, incident, or any other event which may occur while the recipient of this scholarship is performing training or activities relating thereto. Recipient shall sign this Hold Harmless Agreement in favor of said entities upon receipt of the scholarship and before any training is made.

SIGNED \_\_\_\_\_ DATE \_\_\_\_\_