Application for Admission

Required information (Please read carefully and print clearly)

Last name (family)	First name (given)	Middle name

Mailing address

City or town	Province or state	Country	Postal or Area code

Home telephone	Work or cellular telephone	Email
( )	( )	

Date of Birth *Day* / *Month* / *Year*	Gender
/ /	Male ☐ Female ☐

Fluent language	Citizen status in Canada
English ☐ French ☐ Other:	Permanent resident ☐ Other:

I am interested in the following courses

☐ **Professional Pilot Package** (approx 12 months) **Start dates**: ☐ Jan 9th, 2008 ☐ Mar 3rd, 2008 ☐ May 5th, 2008 ☐ Jul 7th , 2008 ☐ Sept 8th, 2008 ☐ Nov 3rd , 2008

Or traditional pilot courses

☐ Recreational Pilot Permit
☐ Private Pilot Licence
☐ Commercial Pilot Licence
☐ Night Rating
☐ Seaplane (Float) Rating
☐ Instrument Rating
☐ Multi-engine Rating
☐ Multi-engine Instrument Rating
☐ Instructor Rating
☐ Bush Pilot Course

Previous experience

Indicate your level of education

☐ High School Diploma ☐ College/University ☐ Other _____

Do you have any previous flight experience? ☐ Yes ☐ No

Pilot Licence held: _____ Country of issue: _____

	Day	Night	Cross-country	Instrument	Multi-engine	**Total time**
Dual						
Solo						

Signature: _____ Date: _____

Fax this application to us at **705-840-2632** or mail it to the address on our website at **www.algonquinflightcentre.com**