

Sonoran Wings Flight Training Centre, Inc.
PO Box 24158
Tucson, AZ 85734-4158

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jerry@sonoran-wings.com

Date (mm/dd/yyyy) _____

PILOT QUALIFICATIONS

Last Name _____		First Name _____	Home Address _____		
Date of Birth _____		City _____	State _____	Zip Code _____	
Occupation _____		List Diplomas/Degrees			
Business Address _____		1. _____			
City _____		2. _____			
State _____		3. _____			
Zip Code _____					

List Employers & Positions Held Over the Past 3 Years (Please include Dates, Contact Name, Position & Phone Number)

1. _____
2. _____
3. _____

AIRMAN CERTIFICATE NUMBER

Number _____

MEDICAL

Class _____

Expiration Date
(mm/dd/yyyy) _____

Limitations _____

CURRENT CERTIFICATES & RATINGS

(Please check all boxes that apply)

- | | | |
|--|--|---|
| <input type="checkbox"/> Student | <input type="checkbox"/> Instructor - CFI | <input type="checkbox"/> Rotocraft |
| <input type="checkbox"/> Private | <input type="checkbox"/> Instrument Instructor - CFII | <input type="checkbox"/> Glider |
| <input type="checkbox"/> Commercial | <input type="checkbox"/> Multi-engine Instructor - MEI | <input type="checkbox"/> A & P Mechanic |
| <input type="checkbox"/> Airline (ATP) | <input type="checkbox"/> Single Engine Land | <input type="checkbox"/> Other |
| <input type="checkbox"/> Instrument | <input type="checkbox"/> Multi Engine Land | |

FLIGHT & GROUND SCHOOL TRAINING COURSES

1. Name & Location of School _____

Type of Aircraft _____ Date (mm/dd/yyyy) _____ Graduated? Yes No
 Initial Training Recurrency Training AATD Flight Simulator Training Ground School Only

2. Name & Location of School _____

Type of Aircraft _____ Date (mm/dd/yyyy) _____ Graduated? Yes No
 Initial Training Recurrency Training AATD Flight Simulator Training Ground School Only

LOGGED PILOT HOURS

 Total Pilot-in-Command Hours for All Aircraft

ITEMIZATION PILOT-IN-COMMAND HOURS

CLASS	TYPE	TOTAL	LAST 90 DAYS	LAST 12 MONTHS	INSTRUMENT 6 MONTHS	VFR INSTRUCTION GIVEN	INSTRUMENT INSTRUCTION GIVEN
Single Engine Fixed Gear	_____	_____	_____	_____	_____	_____	_____
Single Engine Retractable	_____	_____	_____	_____	_____	_____	_____
Multi Engine Piston	_____	_____	_____	_____	_____	_____	_____
Turbo-Prop	_____	_____	_____	_____	_____	_____	_____

PLEASE ANSWER ALL QUESTIONS

In consideration for employment with Sonoran Wings Flight Training Centre, Inc. we ask for the following information to be provided.

1. Have you ever had an aircraft, incident, or accident? Yes No
2. Have you ever been cited or fined for violation of an aviation regulation? Yes No
3. Has your pilot certificate ever been suspended or revoked? Yes No
4. Have you ever been convicted of a felony or are you under indictment for a felony? Yes No
5. Have you ever been convicted of driving a motor vehicle under the influence of alcohol or narcotics? Yes No
6. Has your drivers' license ever been suspended or revoked? Yes No
7. Have you ever been convicted of or are you under indictment in a legal action involving drugs or narcotics? Yes No
8. Have you ever had or been treated for a chemical dependency? Yes No
9. Are you regularly using any medication? Yes No

Explain fully each "YES" answer.

 All of the information submitted is true and correct to the best of my knowledge and I have not knowingly or intentionally concealed or misrepresented any facts.

 Applicant Signature

 Date (mm/dd/yyyy)

This application is an on-line fillable document, use tab key to move between fields. Download (free) Adobe Acrobat Reader 7.0 from the Adobe web-site. Send to: jerry@sonoran-wings.com or mail to Sonoran Wings Flight Training Centre, Inc., PO Box 24158, Tucson, AZ 85734-4158.