



EAA Flight Advisor Application



Please complete and return to address listed at bottom of form

Name, Last _____ First _____ MI _____ Nickname _____

Address _____

City _____ State/Province _____ Zip _____ Country _____

Best number to reach you (H, C, W) _____

EAA # _____ E-mail _____ EAA Chapter # _____ (if applicable)

REQUESTED AREA(S) OF SPECIALTY, (you are not limited to any one category)

Homebuilts Ultralight Rotorcraft Standard Category Parawing

PERSONAL BACKGROUND-REQUIRED

In addition to the other information provided in this application, we are interested in any of your background (occupation, interests, hobbies, civic duty) that may be valuable in evaluating your contribution to the EAA Flight Advisor Program. Please provide information on a separate sheet.

FLIGHT TIME, PIC ONLY (please estimate) _____ hrs TOTAL TIME: _____ hrs

AIRCRAFT TYPE EXPERIENCE

Chose the area indicating the category in which you would prefer to specialize (one is required)

High Performance Low & Slow Bi-plane Aerobatic STOL

CREDENTIALS (civilian or military equivalent)

License

CFI
 LSA
 Recreational
 Private
 Commercial
 ATP

Ratings

Sport Pilot
 Multi
 IFR
 Sea
 Rotor

Miscellaneous

EAA Technical Counselor # _____
 Repairman's Certificate
 Credentialed Flight Test Pilot
 Designated Pilot Examiner

ENDORSEMENT:

If you represent an EAA Chapter, you must provide the signature of the local chapter president. If you will serve "At Large" (not connected with a Chapter), you must provide a CFI or Aviation School/FBO signature.

Chapter # _____ Chapter President Signature _____ Phone # _____

CFI # _____ CFI Signature _____ Phone # _____

Aviation School/FBO _____ Signature _____

Applicant Signature _____ Date _____

Return to:

EAA Safety Programs
P.O. Box 3086, Oshkosh, WI 54903-3086
920.426.6864 | safetyprograms@eaa.org