

# International Student Application Form

## JetOne Aviation Academy

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### ATTENTION

The information that you provide in this application form serves numerous principal purposes that include but not limited to Program Certifications, Flight Training Application, TSA Application, SEVIS I-901, School Record, US FAA Training Audit, I-20 Visa Application, and Employer References. Therefore, it is your responsibility to ensure the supplied information as accurate and complete as possible. JetOne Academy DOES NOT/WILL NOT warrant the data accuracy you hereby provide to any entity whether private or governmental for the purpose of references or application related processing.

Privacy is important to everyone, the information you hereby provide is kept strictly confidential and ONLY be used for the purposes pertain to the above-mentioned procedures.

### PERSONAL INFORMATION

**Name** *(Please print as it appears in your passport)*

**Mr. / Ms.**

Family Name (CAPITALS)	First	Middle	Race/Ethnicity
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Post Address			
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City	Zip Code	Country
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Home Phone	Daytime Phone	Email
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Emergency Contact: Name	Address	Telephone Number
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Current Occupation
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Highest Level of Education
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Do you read, speak and understand English? **YES / NO**

### PASSPORT INFORMATION

Date of Birth (MM/DD/YY)	Age	Gender	Height (inches)	Weight (pounds)
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Place of Birth (city and country)	Citizenship
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Passport Country of Issue	Passport Number
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Passport Date of Issue	Passport Expiration Date (MM/DD/YY)
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### Program/VISA INFORMATION

Intended Program Start Date (MM/DD/YY)
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Intended Arrival Date to USA

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Have you previously been on a M-1 Visa? **YES / NO**

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**TRAINING PROGRAM**

- Professional Pilot Program (*Private through Multi-Engine Flight Instructor*)
- Private Pilot License
- Instrument Rating
- Commercial Pilot License
- Multi-Engine
- Certified Flight Instructor
- Certified Flight Instructor Instrument
- Multi-Engine Flight Instructor
- Airline Transport Pilot
- Other \_\_\_\_\_

**FLYING EXPERIENCE**

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Do you have prior flying experience or FAA Medical Certificate?

**Class:**

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FAA Medical Certificate: \_\_\_\_\_ Date Issued \_\_\_\_\_

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Total Airplane Hours \_\_\_\_\_ Total Helicopter Hours \_\_\_\_\_ Date of Last Flight \_\_\_\_\_

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Certificates and Rating Held \_\_\_\_\_ Issuing Country \_\_\_\_\_

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Have you taken any FAA Written Exams?

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How did you hear about JetOne Aviation Academy?

**To the best of my knowledge, I certify that the information provided is true and correct.**

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*Signature*

*Date*

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*Parent or legal Guardian if applicant is under 18 years old*

*Date*