



**UNMANNED AIR VEHICLE – GROUND SCHOOL PILOT CERTIFICATION PROGRAM**

Please print clearly

**Student Application**

Legal Last Name (surname)		First Name (legal)		Middle Names (legal)	
Address		Former Surname		Gender M - F	Citizen of
City		Date of Birth (yyyy-mm-dd)		Place of Birth	
Province	Postal Code	Phone		email	

**Past Experience:**

Type & Model	Time on Type

**Services required:**

√ Check selected box.

Home Stay Accommodation	<input type="checkbox"/>	Number of weeks: _____
Locate Other Accommodation	<input type="checkbox"/>	Number of weeks: _____

<b>Desired Start Date</b>	yyyy-mm-dd	<b>Enclose Application Fee \$200.00</b>	<input type="checkbox"/>
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Payment: Cheque, Money Order or Bank Transfer.

For Assistance: Phone 800-670-1364 or email [rwyers@skydroneuavs.com](mailto:rwyers@skydroneuavs.com)