## **Pauwels Flying Scholarship**

## Mentor Programme Application

Full Name			
Age			
Address			
Contact Details – email and cell phone			
Gender (circle one)	Female	Male	Other
Aviation Experience so far			
Flight Hours			
Preferred Mentors	First Choice Second Choice Third Choice		
Why Do You Want a Mentor?			

Tell us a bit about you					
,,,,					
PRIVACY ACT	2020 DECLARATIO	N			
	, • ,	se and disclose personal information Act 2020 for the following purposes:-			
=		ls Flying Scholarship and Mentors, for gramme and being assigned a Mentor.			
<u>-</u>	ding medical examinations and one of a mentor being able to property.	•			
• •	cademic information, as may be s clubs, service groups);	deemed relevant, to or from other			
4. Providing my nam	Providing my name and contact details to persons wishing to arrange publicity; and;				
	•	2020 I may access and correct personal d by the Pauwels Flying Scholarship.			
Signed by					
Applicant		Parent/Caregiver (if under 18)			