

2x2	

FAAI PILOT TRAINEE APPLICATION FORM

☐ Private Pilot Course ☐ Commercial Pilot C	Course	Course	t Rating	Air Transport Pilot Training			
GENERAL INFORMATION							
Applicant's Name				Gender			
Last Name First	Mid	Middle Name					
Current Residence Address				Telephone / Mobile No.			
No. (Building Name) Street		Barangay/Subdivision		E-mail Address			
District/Municipality Provi	ince		Zip Code				
Provincial Address (if any)							
Date of Birth	Place of Birth		Nationality				
Birth Mark/s	Built		Weight				
Degree	Religion		Height				
How did you know FAA? ☐ Social Media ☐ Web Search ☐ A	gent (Agent's Code)	Referral	(Name)				
FAMILY PARTICULARS							
Marital Status ☐ Single ☐ Married	□Divorced	Others					
Name of spouse	ame of spouse			Occupation			
Father's Name			Date of B	irth			
Company Name		Company Address					
Position	Contact No.		Email Add	dress			
			_				
Mother's Name			Date of B	irth			
Company Name		Company Address					
Position	Contact No.		Email Add	dress			

Name of Siblings	Age	Education	Occupa	Occupation	
		_			
		_			
DISCLAIMER					
To provide you with World Class Aviat and FAAI understands that such perso of such personal information could cau utilized by FAAI, how that information	onal informationse irreparabl	on as valuable and pro e harm. Our Privacy P	opriety and any unauth Policy outlines the infor	orized use or disclosure mation collection practices	
The confidentiality and security of your securely at all times and will not be proapplication or as required by law or incomplete.	ovided to any	unauthorized third pa			
If you wish to have access to your per you is incomplete, not-up-to-date, or through the email address: faadatapriv	otherwise ir	naccurate, you may o	•		
Should you have questions and/or cordata, or your rights in relation thereto uthe FAAI Data Privacy Officer at (047)	under Republi	-	•		
I have read and understood the terms requested.	and condition	ns of this privacy state	ment and freely give m	ny information to FAAI as	
I certify that the information contained	in this applica	ation is correct to the b	est of my knowledge.		
I understand that to falsify information	is grounds fo	r refusing my applicati	on to enroll at First Av	iation Academy, Inc.	
I hereby authorize anyone from the So all information concerning my previous request and receive such information.					
"In consideration of my application, I a withdrawn, added or interpreted at any					
Print name and affix S	Signature			Date	
Requirements:					

- 1. PSA Birth certificate (Photocopy)
- 2. NBI Clearance
- 3. 2 pcs. 2x2 with white background
- 4. High School or College diploma (Photocopy Certified true copy)
- 5. Transcript of records (Photocopy Certified true copy)