## NORTHEAST CHAPTER BASIC/ADVANCE AIRPORT SAFETY AND OPERATIONS SPECIALIST (ASOS) SCHOOL GRANT GUIDELINES & APPLICATION

## Applicant shall type or print all information on the application and submit it to: NEC/AAAE, 230 Washington Ave Ext. Suite 101, Albany, NY 12203.

Two grants a year may be awarded to cover all reasonable expenses of the recipient's attendance at the Basic or Advanced Airport Safety and Operations (ASOS) Specialist School, including enrollment fees, travel, and lodging.

The ASOS Schools are designed to increase awareness of FAA's Part 139 airport certification program, as well as enhance the professionalism an basic safety responsibilities of airport operations personnel. These professional schools are specifically tailored to airport personnel responsible for the day-to-day operations of public-use (both commercial service and general aviation) and military airports throughout the United States.

ELIGIBILITY: Limited to any NEC/AAAE Member in good standing.

## **APPLICANT INFORMATION**

| FULL NAME  |  |   |                        |                |
|--|--|---|------------------------|----------------|
| ADDRESS  |  | CITY  | STATE                  | ZIP            |
| PHONE #  |  | EMAIL ADDRESS   |                        |                |
| A.A.E. or Executive Candidate?   | s □ No                                 |   |                        |                |
| EDUCATION  |  |   |                        |                |
| HIGH SCHOOL  | YEAR GRADUATED                         | OTHER COLLEGE, GRADUATE   | , OR TECHNICAL SCHOOLS | YEAR GRADUATED |
| COLLEGE  | YEAR GRADUATED                         | DEGREE/MAJOR SEMESTER HOURS COMPLETE  |                        |                |
| DEGREE/MAJOR   | SEMESTER HOURS COMPLETED               |   |                        |                |
| CURRENT EMPLOYER   | ed by an airport, please indicate what | category airport) PREVIOUS EMPLOYER   |                        | SUPERVISOR     |
|  |  |   |                        |                |
| ADDRESS  | PHONE #                                | ADDRESS   |                        | PHONE #        |
| JOB TITLE  |  | JOB TITLE   |                        |                |
| Describe your work:  |  | Describe your work:   |                        |                |
|  |  |   |                        |                |
| NEC/AAAE OR NATIONAL AA  | AE PARTICIPATION                       |   |                        |                |
| Are you a member of the NEC/AAAE? $\square$ Yes $\square$ No           |  | Other NEC/AAAE or National AAAE Conferences or schools attended:            |                        |                |
| Have you previously applied for a NEC                                  | C/AAAE grant? 🗆 Yes 🗆 No               |   |                        |                |
| If yes, what grant and when?   |  | What NEC/AAAE activities do you now participate in or have participated in? |                        |                |
| Have you previously <u>been awarded</u> a If yes, what grant and when? | NEC/AAAE grant? 🗆 Yes 🗀 No             |   |                        |                |
|  |  |   |                        |                |

## APPLICANT'S STATEMENT (Attach additional sheets if necessary)



In what way do you think you will benefit from being a recipient of this grant?

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|--|--|
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| EMPLOYER RELEASE (Attach additional sheets is necessary)   |  |
| The Chapter strongly recommends that the candidate awarded this grant be allowed to utilize this Grant without using personal leave. | For the purpose of classifying the applicant's absence from his normal work location, it is understood that the applicant's attendance at this event will be considered (check one): |
|  | Work related with time charged in accordance to<br>employer's policies (normal salary/ 8 hour day)   |
|  | $\square$ Vacation   |
|  | □ Personal/comp time   |
|  | □ Leave without pay  |
|  |  |

I hereby acknowledge that all the information provided in this application is accurate to the best of my knowledge.

APPLICANT'S SIGNATURE

DATE

All information on this form is subject to verification by the NEC/AAAE; however, this information is kept confidential for use in the grant selection process only. Failure to provide the requested information may disqualify the applicant.

This RELEASE must be signed and witnessed for those applying for all Grants.

The selected candidate agrees, as a prior condition to the acceptance of the NEC/AAAE award, to release the (Official name of airport, if an airport employee) and the NEC/AAAE from any liability claims that might arise from the acceptance of this Award.

APPLICANT'S SIGNATURE

DATE

WITNESS' SIGNATURE

APPLICANT'S PRINTED NAME

WITNESS' PRINTED NAME

DATE