



ROBERT NOWAK INTERNATIONAL AVIATION SNOW SYMPOSIUM 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.

Three grants a year may be awarded to cover all reasonable expenses of the recipient's attendance at the International Aviation Snow Symposium, including enrollment fees, travel, and lodging.

ELIGIBILITY: Two awardees must be NEC members in good standing. The third Grant may be awarded to an airport staff member from outside the Chapter area. Nominee should have some responsibility with respect to airport snow removal; however airport management students will be considered.

APPLICANT INFORMATION

FULL NAME			
ADDRESS	CITY	STATE	ZIP
PHONE #	EMAIL ADDRESS		
A.A.E. or Executive Candidate? <input type="checkbox"/> Yes <input type="checkbox"/> No			

EDUCATION

HIGH SCHOOL	YEAR GRADUATED	OTHER COLLEGE, GRADUATE, OR TECHNICAL SCHOOLS	YEAR GRADUATED
COLLEGE	YEAR GRADUATED	DEGREE/MAJOR	SEMESTER HOURS COMPLETED
DEGREE/MAJOR	SEMESTER HOURS COMPLETED		

WORK EXPERIENCE (If employed by an airport, please indicate what category airport)

CURRENT EMPLOYER	SUPERVISOR	PREVIOUS EMPLOYER	SUPERVISOR
ADDRESS	PHONE #	ADDRESS	PHONE #
JOB TITLE		JOB TITLE	
Describe your work:		Describe your work:	

NEC/AAAE OR NATIONAL AAE PARTICIPATION

Are you a member of the NEC/AAAE? Yes No

Have you previously applied for a NEC/AAAE grant? Yes No
If yes, what grant and when?

Have you previously been awarded a NEC/AAAE grant? Yes No
If yes, what grant and when?

Other NEC/AAAE or National AAE Conferences or schools attended:

What NEC/AAAE activities do you now participate in or have participated in?

APPLICANT'S STATEMENT (Attach additional sheets if necessary)

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

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.

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

APPLICANT'S SIGNATURE

DATE

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 employer's policies (normal salary/ 8 hour day)
- Vacation
- Personal/comp time
- Leave without pay

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

DATE

APPLICANT'S PRINTED NAME

WITNESS' PRINTED NAME