Flight Training Finance Application

Flight School Name (if known)			P_{ILOT}
City and State (if known)			FINANCE, INC.
School to be determined later	X Online Application	Downloaded Application	



First Name MI Last Name		Date of Birth		Social S	Security No		
Address		City/State/Zip					
				\$			
Home Phone or None		Own Rent	Years There		Payment		
Cell Phone or None		Email Address or N	lone				
Previous Address if Less than 5 Years at Current Address		City/State/Zip					
Reason for Move		Own Rent	Years There	\$ Monthly	Payment		
Employer		Business Phone				Part-Time	Full-Time
Address		City/State/Zip					
Position		Years There		Annual	Salary		
Previous Employer if Less than 5 Years With Current Employ	ver	Business Phone				Part-Time	Full-Time
Address		City/State/Zip					
Previous Position		Years There		Annual	Salary		
YOUR CREDIT AND PERSONAL REFERENCES:							
Credit Reference		Account No		Balance	Owing		
Personal Reference	Address/City/State/Zip				Phone		
Name/Relationship of Nearest Relative Not Living With You	Address/City/State/Zip				Phone		
YOUR FLIGHT TRAINING TO BE FINANCED (con	nplete as accurately as you ca	an):					
Your Current Flight Experience: None Certificate Held					Total Hou	urs	
Your Anticipated Achievement With this Training					Fixed-Wi	ng Ro	or/Helicopter
\$				\$			
Estimated Training Cost (if known)	Preferred Cash Down Paym	nent: \$250.00 (sta	andard) Other				
Please choose the training and finance package that b	est suits your needs:						
1 Lesson Per Week/72 Payments 3 Les	ssons Per Week/48 Payments	5 Les	sons Per Week/18 F	ayments			
2 Lesson Per Week/60 Payments 4 Les	ssons Per Week/30 Payments	Other					

☐ By checking this box, I certify that all of the information I have provided on this application is correct and complete. I authorize Pilot Finance, Inc. to investigate any facts and obtain and exchange reports and information regarding this application and/or resulting account(s) with credit reporting agencies and others. Upon request I will be informed of each agency's name and address.

OPTIONAL: CO-BORROWER OR GUARANTOR INFORMATION

First Name	MI Last Name	Date of Birth	Date of Birth Social Security No						
Your Relationship to the Fli	ight Student								
Address		City/State/Zip	City/State/Zip						
Home Phone or None		Own Rent Years There	\$ Monthly Payment						
Cell Phone or None		Email Address or None	Email Address or None						
Previous Address if Less th	nan 5 Years at Current Address	City/State/Zip							
Pagaon for Mayo		Our Pont Vegra There	\$ Monthly Paymont						
Reason for Move		Own Rent Years There	e Monthly Payment						
Employer		Business Phone	Part-Time Full-Time						
Address		City/State/Zip	City/State/Zip						
Position		Years There	Annual Salary						
Previous Employer if Less	than 5 Years With Current Employer	Business Phone	Part-Time Full-Time						
Address		City/State/Zip	City/State/Zip						
Previous Position		Years There	Annual Salary						
For example, if you thin helpful for us to have you the near future, you may You may also use this s	our application! This section is provided in case alk there may be negative historical information our comments on the cause of the past proble by want to comment on the amount and certain space to tell us about regular income you recei	in your credit report due to financial problems and how you have corrected them. Only of the change.	lems you have experienced in the past, it may be or, if you anticipate a significant salary increase in at alimony, child support, or separate maintenance is. Continue on additional sheets it necessary.						