



Thank you for your interest in our Academy. Our flight training is **second to none** with the proven concept of one-on-one instruction in our self-paced programs as well as accelerated professional programs, coupled with our climate and location, where the primary emphasis is you, the student.

Our course descriptions are available online at: [www.usflightacademy.org](http://www.usflightacademy.org).

**To apply at our Academy you will need to submit the following documents:**

The Form A1- **Application for Admission** (if under 18 years this form must be signed by parent or legal guardian).

**Please note: The U.S. Department of Homeland Security now requires that candidates must provide proof of citizenship in order to attend pilot training. The Transportation Security Administration (TSA) will not allow flight training to commence without proof of U.S. Citizenship in the form of one of the following documents:**

- a) **A valid, un-expired United States passport. The passport must remain valid throughout the entire length of the training course.**
- b) **An original birth certificate, with raised seal, documenting birth in the United States or one of its territories, along with a valid un-expired government issued photo I.D. (such as a driver's license).**
- c) **An original U. S. naturalization certificate with raised seal (Form N-550 or Form N-570), along with a valid un-expired government issued photo I.D. (such as a driver's license).**
- d) **An original certificate of U.S. Citizenship (Form N-560 or N-561) or a certificate of repatriation (Form N-581) along with a valid un-expired government issued photo I.D. (such as a driver's license).**
- e) **A U.S. federal government issued I.D. badge if training for the U.S. government and a U.S. government entity is paying for the training.**

Upon inspection, a copy of the appropriate document and picture I.D. will be secured in the candidate's administrative folder. Allow two weeks for processing upon receipt of all required documents. If we can be of further assistance, please contact me at [administrator@usflightacademy.org](mailto:administrator@usflightacademy.org).

Sincerely,

*Michelle Martinez*

Michelle Martinez  
Director of Admissions and Assessments



**APPLICATION FOR ADMISSION**

**FORM A-1**

**I. PERSONAL INFORMATION:**

Name: \_\_\_\_\_  
(Last) (First) (Middle)

Street Address: \_\_\_\_\_

City, State\Country, Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Sex: \_\_\_\_\_ Marital Status: \_\_\_\_\_

Primary e-mail: \_\_\_\_\_

E-mail (to send accounting invoices): \_\_\_\_\_

Emergency Contact Name and Phone: \_\_\_\_\_

Employer (Company Name): \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Country: \_\_\_\_\_

Phone: \_\_\_\_\_

**II. ADMISSION INFORMATION:**

Have you previously been a student at the U. S. Flight Academy? Yes: \_\_\_\_\_ No: \_\_\_\_\_

If yes, provide date of graduation: \_\_\_\_\_  
(Month/Day/Yr.)

Seeking admission to course: (Check desired course. Also check USFA Professional if professional course is desired.)

- |  |  |  |
|--|--|--|
| 1/2. <input type="checkbox"/> Recr/Sport Pilot | 8. <input type="checkbox"/> USFA 1280  | 14. <input type="checkbox"/> USFA 1550         |
| 3. <input type="checkbox"/> USFA 1000          | 9. <input type="checkbox"/> USFA 1300  | 15. <input type="checkbox"/> USFA 1600         |
| 4. <input type="checkbox"/> USFA 1100          | 10. <input type="checkbox"/> USFA 1330 | 16. <input type="checkbox"/> USFA 1800         |
| 5. <input type="checkbox"/> USFA 1200          | 11. <input type="checkbox"/> USFA 1340 | 17. <input type="checkbox"/> USFA Professional |
| 6. <input type="checkbox"/> USFA 1220          | 12. <input type="checkbox"/> USFA 1400 |  |
| 7. <input type="checkbox"/> USFA 1270          | 13. <input type="checkbox"/> USFA 1500 |  |

Requested start date (first Monday of each month): 1) \_\_\_\_\_ 2) \_\_\_\_\_  
(Month) (Month)

Prior Experience	Cross Country	Night	Instr.	Simulator
Dual				
Solo				
PIC				
Total				



Physical record:

D.O.B.: \_\_\_\_\_  
(Date of Birth - Month/Day/Yr)

P.O.B.: \_\_\_\_\_  
(Place of Birth include County and Country)

Medical Certificate held or statement of general health: \_\_\_\_\_  
\_\_\_\_\_

### III. FINANCIAL INFORMATION:

How will you finance your training at U. S. Flight Academy? (Supporting documentation is required.)

- |                         |                            |
|-------------------------|----------------------------|
| 1. _____ Family Funds   | 4. _____ Gov't Sponsored   |
| 2. _____ Personal Funds | 5. _____ Airline Sponsored |
| 3. _____ Scholarship    | 6. _____ Other             |

Eligible for Veterans Benefits? Yes: \_\_\_\_\_ No: \_\_\_\_\_

I have received and understand the course information and requirements and wish to enroll in the U. S. Flight Academy International, Inc., for the courses that I have specified above. I certify that the above statements are correct and complete to the best of my knowledge.

Date: \_\_\_\_\_

\_\_\_\_\_  
**Applicant's Signature**



If the applicant is under 18 years of age, the following must be signed by parent or legal guardian and USFA will need to make a copy of the responsible person's government issued I.D.:

The undersigned, being Parent/Legal Guardian of the above named applicant, consents to his/her application for admission to the U. S. Flight Academy International, Inc.

\_\_\_\_\_ (Date) \_\_\_\_\_ (Signature)

Printed Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State/Country, Zip: \_\_\_\_\_

Referred by: \_\_\_\_\_

U. S. Flight Academy is an equal opportunity educator/employer.