



DCT AVIATION FTC & PA

Environment for Adventure.....

6226 N. Service Drive
Waterford, MI 48327 Website: www.dctaviation.com

Phone #: (248) 666 1800
E-mail: info@dctaviation.com

Please print as shown on pilot certificate (if applicable):

Date _____

Last Name _____ First Name _____

Street _____ Apt _____ City _____ State _____ Zip _____

Home Phone (____) _____ Business Phone (____) _____ Cell Phone (____) _____

Pilot's Certificate # (if applicable) _____ E-mail address _____

How did you hear about DCT Aviation?

Phone Book _____ Referral (name of friend) _____

Walk in _____ Website _____ Internet _____ Radio _____ Newspaper/Magazine _____

Other (please state) _____

Are you a citizen of the United States? _____ Yes _____ No

I am interested in the following training (please check all that apply):

- | | | |
|--------------------------|-------------------------------|----------------------------------|
| _____ Private Pilot | _____ Instructor Rating | _____ Personal Aircraft Training |
| _____ Instrument Rating | _____ Airline Transport Pilot | _____ Rental Check Out |
| _____ Commercial Pilot | _____ Multi-Engine Rating | _____ Other (please state) |
| _____ Recurrent Training | _____ | |

Certificated Pilots Only (Please check all Pilot Certificates and Ratings Currently Held)

Student _____ Private _____ Instrument _____ Commercial _____ Multi-Engine _____ CFI _____
 CFII _____ MEI _____ Seaplane _____ Helicopter _____ Other _____
 Date first rated as a pilot _____ Medical Certificate Class: _____ First _____ Second _____ Third _____
 Waivers / Limitations _____ Date of Last Biennial Flight Review _____
 Has your pilot certificate ever been revoked / suspended? _____
 Have you ever been cited for any FAR violation? _____
 Do you have a renter's insurance policy in effect? _____
 Do you own a personal aircraft? _____ If yes, what model? _____
 Have you previously received training with DCT Aviation? _____ If yes, When? _____

Previous Flight and Ground Experience (if applicable)

School	Location	Course of Study
_____	_____	_____
_____	_____	_____
_____	_____	_____

I certify that all information given is true and correct to the best of my knowledge.

Signature _____