

6. Have you completed any work experience to date? If so, please provide details:

7. Anything relevant you'd like to share with us to help our student selection process?

Parent / Guardian Name: _____

Signature: _____

IMPORTANT - PLEASE NOTE THE FOLLOWING:

- Completed application forms should be returned to;
Jane Magill, MD Atlantic Air Venture,
Link Road, Shannon,
County Clare
or scan / email to info@atlanticairventure.com
- Transportation to Atlantic Air Venture facility in Shannon must be arranged by the students themselves similar to any work experience arrangement.
- The academy fee is covered by GECAS however a student contribution of €20 is required to cover Atlantic Air Venture administrative costs.
- For more information on GECAS Visit: www.gecas.com



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