

AEA Avionics Training Excellence Award

Application for Recognition Form - 2015 Award Year



Contact Person Name

Company Name

Company Address

City

State/Province

Zip/Postal Code

Phone

Fax

Email

Total Number of Technicians Employed in 2015 (required)

TRAINING CERTIFICATION

Technician(s) Names

AEA Recognized Training Received in 2015 (check all that apply)

_____	<input type="checkbox"/> AEA Convention or Regional Meeting	<input type="checkbox"/> AEA Web Training
_____	<input type="checkbox"/> <i>Avionics News</i> Technical Training Exam	<input type="checkbox"/> OEM Training
_____	<input type="checkbox"/> AEA Partner Training	<input type="checkbox"/> Other AEA Training
_____	<input type="checkbox"/> AEA Convention or Regional Meeting	<input type="checkbox"/> AEA Web Training
_____	<input type="checkbox"/> <i>Avionics News</i> Technical Training Exam	<input type="checkbox"/> OEM Training
_____	<input type="checkbox"/> AEA Partner Training	<input type="checkbox"/> Other AEA Training
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_____	<input type="checkbox"/> AEA Partner Training	<input type="checkbox"/> Other AEA Training

For each box checked above please attach copies of technician's certificates of training, AEA meeting & convention training certification forms or other proof of training received in 2015.

Use additional forms as needed for more than seven technicians.

I certify that the information provided on this application is accurate to the best of my knowledge. I hereby submit application for the AEA Training Excellence Award and agree to display the award and recognition materials. I also understand that this is an annual award and my renewal will be subject to completion of the annual Application for Recognition Form and review by the award committee.

Signature

Date

Title

**Mail this completed application along with proof of training paperwork to:
AEA Avionics Training Excellence Award, 3570 NE Ralph Powell Rd. Lee's Summit, MO 64064
Completed application packages must be received by **April 1, 2016****