



MICHIGAN AERONAUTICS COMMISSION

Committee Membership Application

Please select the committee(s) you are applying to:

- ☐ General Aviation Advisory Committee
- ☐ Commercial Aviation Advisory Committee
- ☐ Aviation Career Pipeline Committee

APPLICANT INFORMATION

Last Name _____ First Name _____

Address _____

Primary Phone _____ Alternate Phone _____

Email Address _____

Employer _____

Employer Address and Website _____

Current Position _____

Aviation Certifications and Ratings _____

Other Aeronautical Experience _____

REFERENCES - Please list three professional references

Full Name _____ Relationship _____

Company _____ Phone Number _____

Email _____

Full Name _____ Relationship _____

Company _____ Phone Number _____

Email _____

Full Name _____ Relationship _____

Company _____ Phone Number _____

Email _____

STATEMENT OF INTEREST – Please provide a short statement on your background, why you are interested in becoming a committee member, and any other relevant information or experience for the committee to consider.

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