John R. Lillard Foundation, Inc.

Aviation Scholarship Program

2024-2025 School Year

Dear Prospective Scholarship Applicant:

On behalf of the Virginia Airport Operators Council (VAOC), we would like to express our appreciation for your interest in the John R. Lillard VAOC Scholarship Program.

The scholarship you are seeking is named in honor of a friend, aviation enthusiast, and great humanitarian. Through his leadership positions with the Capital Region Airport Commission (which operates Richmond International Airport), Chesterfield County Airport, and Eastern Airlines, John always displayed a zeal and thirst for life, aviation, family, and friends. Because of his great spirit, we seek to share and commemorate his unique and special gifts with others. It is also through the kind and generous support of many of the members of the VAOC that this scholarship program is available to assist future aviation leaders as well as honor John. To this end, we're honored that you are contemplating applying for our 2024/25 scholarship award in the amount of \$3,000.00.

Please visit the Virginia Department of Aviation's website (www.doav.virginia.gov) to view the scholarship. In order for your application to be considered, you must be a Virginia high school senior, have at least a 3.50 unweighted GPA; be planning a career in the field of aviation, and must be enrolled or accepted into an aviation-related program at an accredited college. It is also necessary for you to:

- 1. Complete the attached application.
- 2. Have your guidance counselor or other high school official sign all required certifications.
- 3. Attach an official copy of your current high school transcript and a copy of acceptance letters or other verification of enrollment or acceptance into a post-secondary institution.
- 4. Attach to the application a typed, double-spaced essay (350 word minimum/500 word maximum) on the subject: "Why I Wish to Pursue a Career in Aviation."
- 5. Attach recommendation letters (no more than three) and a typed (one-page maximum) sheet listing both school related and extracurricular activities demonstrating accomplishments and leadership capabilities.
- 6. Mail all documents to:

VAOC Scholarship, c/o Virginia Department of Aviation, Attn: Tony Sotelo, 5702 Gulfstream Road, Richmond, VA 23250-2422.

The deadline for receipt of applications with all documentation is Friday, February 28, 2025

Applications will be evaluated as follows: 40% Scholarship (GPA), 35% Essay, and 25% Accomplishments and Leadership. Thank you again for your interest in the John R. Lillard Virginia Airport Operators Council Scholarship Program. Best wishes for continued success in your academic endeavors.

Sincerely yours,

The John R. Lillard Scholarship Foundation, Inc.

John R. Lillard Foundation, Inc. Aviation Scholarship Program Application

John R. Lillard Scholarship \$3,000.00

VIRGINIA AIRPORT OPERATORS COUNCIL

The John R. Lillard Foundation, Inc. (the Foundation) distributes financial assistance to deserving students who are graduating from a public high school within the

Commonwealth of Virginia and who are admitted to an institution of higher education in the field of aviation

management and/or aviation sciences. Unless otherwise directed by the applicant, the Foundation will consider applicants for both the John R. Lillard and Kenneth R. Scott scholarships. The Foundation reserves the right to award a \$3,000 scholarship to two separate applicants or combine both scholarships for a single applicant, at its sole discretion. The Foundation has an equal opportunity policy for judging all applications.

Name:		Applicant Information:	Phone: ()
 Email:			_
Mailing A	ddress:		
How did yo	ou hear about this Scho	plarship?	
		High School Information:	
Name of So	chool:		
Address:			
Phone: (_)	Date of Graduation: -	
		High School Certification:	
As verified by th	e attached high schoo	grade transcript, I hereby certify that th a 3.50 GPA in all completed courses to	e above named student has maintained at least o date.
Name a	and Title of High Schoo	Official (Typed or Printed)	Signature and Date
		Post-Secondary Acceptance Certificati	on:
As verified by end	losed documentation,	I hereby certify that the above named st	udent is enrolled in or accepted for enrollment ir
The		program at	/A 19 1 (
			(Accredited Institution)
Name an	d Title of High School (Signature and Date	
		Applicant Certification:	
I		verify that all information listed above	e is correct
Applican	t name (printed)		Signature and Date