

Airman Flight School, Inc
1950 Goddard Ave.
Norman OK 73069

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Student Enrollment Form

Student ID: 19041 Account Number :33778

Student Name

First :ZHCARIAS

Last: MOUSSAOUI

SSN: 000-00-0000

Address :23 H LOMBERT RD.

City: LONDON SW2 5BB

State:

Zip:

Telephone: 317-1919

D.O.B.: 05/30/1968

Place of Birth: ST. JEAN DE LUZ

Certificate Type: STUDENT

Certificate No:

Issue Date: 03/01/2001

Medical Class: SECOND Issue Date: 03/01/2001 Enroll Date: 02/26/2001 VA:

Course: PRIVATE PILOT CERTIFICATION (ASE)

Sent to FAA: 02/26/2001

End Date:

Graduation Date:

Termination Date:

Reason For Termination:

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I Certify That The Above Record is True And Correct

Chief Instructor _____ Date _____

