Charles R. & Helen G. Taylor Memorial Aviation Scholarship

Charles Robert 'Bob' Taylor's aviation career and life-long love of airplanes began when he was just ten years old. A barnstormer from Denver came to Bob's hometown (Hurley, NM) with a Ford tri-motor and a Waco bi-plane. Bob's job was to distribute leaflets, service the engines, and clean the cabins after each flight. Bob served as an air crewman on PB4Y's during WWII in both the Atlantic and Pacific theaters. During the waning months of WWII, Bob met Helen Kelly who later became his wife and life-long companion.

After the war, Bob earned his CAA aircraft and engine mechanic's license. Upon graduation, he trained pilots for the Korean War. He and Helen then formed their own company, which engaged in aircraft maintenance, flight instruction, and charter operations.

Bob began working for the FAA in 1958; for 30 years, he served in several capacities: General Aviation Maintenance Inspector, Special Inspector of Air Taxi Operators, General Aviation Maintenance Specialist, and Chief of the FAA Administration's Flight Standards Office in Helena.

In retirement, Bob began designing models of vintage aircraft and steam locomotives. Many of his models are on display at the Helena Airport Terminal.

The Taylor family is graciously offering a $1,000 annual scholarship to a second-year aviation student, which will be applied to the 2027-2028 academic year.

Deadline: **March 31st, 2027**

Eligibility Criteria:

- Enrolled in 2nd year of Aviation Maintenance Technology,
- Minimum 3.0 GPA.

Selection Decision:

The Taylor family will review applications and notify Helena College, who will then award the scholarship funds on their behalf. Each scholarship recipient will write an acknowledgement letter (thank you) to the Taylor family.

Application Procedure & Criteria:

1. Complete the application form and return it to the Financial Aid Office on or before the deadline,
2. Complete a 1-2-page essay explaining educational and future career goals and how this scholarship would allow you to reach these goals,
3. Attach two (2) completed reference forms (one academic), letters of recommendation can be included, but are optional.

HELENA COLLEGE
UNIVERSITY OF MONTANA

Charles R. & Helen G. Taylor Memorial Aviation Scholarship Application Form

Applicant Name _____

Mailing Address_____

City _____ **State** _____ **Zip** _____

Telephone Number _____

References: List the names of two (2) individuals who will complete reference forms to accompany this application. **Attach the reference forms to this application in a sealed envelope.**

Name_____ Phone_____

Name_____ Phone_____

Application Checklist:

- ☐ Completed application form
- ☐ 1-2 page essay of need, educational & career goals
- ☐ Two Reference Forms (one academic)

The scholarship committee/Helena College may submit a notice of the award to the local newspaper or use the award information in public relations documents. The award information may include your name, program and dollar amount awarded. By signing this form you acknowledge and agree that this information may be disclosed.

Signature _____ **Date** _____

Submit completed application and material to Helena College Financial Aid Office at 1115 North Roberts Street, Helena, MT 59601.

The deadline for the 2026-2027 Taylor Memorial Scholarship is March 31st , 20277.

Office Use Only:
GPA: _____ Date Received

HELENA COLLEGE
UNIVERSITY OF MONTANA

Scholarship Reference Form 1 for

Charles R. & Helen G. Taylor Memorial Aviation Scholarship

SECTION I: To Be Completed by the Applicant

Name _____

Under the Family Rights and Privacy Act of 1974, students enrolled at Helena College University of Montana have access to their educational records, including letters of recommendation. However, students may waive their right to see letters of recommendation, and therefore, the letters will be held in confidence. I waive the right to review the reference form.

Student Signature _____ **Date** _____

SECTION II: To Be Completed By Evaluator

The above named individual is applying for a scholarship through Helena College University of Montana. Please rank the applicant in the categories below by placing an X in the appropriate box. Please return the form as soon as possible to the Financial Aid Office. If an applicant has not signed the waiver above, he or she may request to see the letters of recommendation after the scholarship decision has been made.

	Excellent	Good	Satisfactory	Below Average	Poor	Not Applicable
Ability to Learn						
Integrity						
Leadership Ability						
Perseverance Toward Goals						
Team Member						
Attitude						
Initiative						
Motivation						
Communication Skills						
Organization/Time Management						
Responsibility						
Self-Discipline						

Please use your personal knowledge of the applicant to respond to the following questions:

1. **How long have you known the candidate, and in what capacity (employer, school instructor, etc.)**

2. **Please tell us what you believe to be the applicant's particular strengths in his/her personal, educational or professional life. If you can, give examples of particular accomplishments.**

3. **What is your knowledge of the applicant's educational goals and his/her progress toward achieving these goals?**

4. **Is there any additional information we should know about this applicant in regard to this scholarship award?**

What is your overall recommendation?

☐ Recommend with Confidence ☐ Recommend ☐ Recommend with Reservations ☐ Do Not Recommend

I may have concerns about this student. Please contact me.

☐ Yes ☐ No

Preferred contact method: ☐ Phone ☐ Email

Evaluator's Name _____

Organization/Institution/Department _____

Title _____

Address _____

Phone Number _____ **Email** _____

Signature of Evaluator _____ **Date** _____

HELENA COLLEGE
UNIVERSITY OF MONTANA

Scholarship Reference Form 2 for
Charles R. & Helen G. Taylor Memorial Aviation Scholarship

SECTION I: To Be Completed by the Applicant

Name _____

Under the Family Rights and Privacy Act of 1974, students enrolled at Helena College University of Montana have access to their educational records, including letters of recommendation. However, students may waive their right to see letters of recommendation, and therefore, the letters will be held in confidence. I waive the right to review the reference form.

Student Signature _____ **Date** _____

SECTION II: To Be Completed By Evaluator

The above named individual is applying for a scholarship through Helena College University of Montana. Please rank the applicant in the categories below by placing an X in the appropriate box. Please return the form as soon as possible to the Financial Aid Office. If an applicant has not signed the waiver above, he or she may request to see the letters of recommendation after the scholarship decision has been made.

	Excellent	Good	Satisfactory	Below Average	Poor	Not Applicable
Ability to Learn						
Integrity						
Leadership Ability						
Perseverance Toward Goals						
Team Member						
Attitude						
Initiative						
Motivation						
Communication Skills						
Organization/Time Management						
Responsibility						
Self-Discipline						

Please use your personal knowledge of the applicant to respond to the following questions:

1. **How long have you known the candidate, and in what capacity (employer, school instructor, etc.)**

2. **Please tell us what you believe to be the applicant's particular strengths in his/her personal, educational or professional life. If you can, give examples of particular accomplishments.**

3. **What is your knowledge of the applicant's educational goals and his/her progress toward achieving these goals?**

4. **Is there any additional information we should know about this applicant in regard to this scholarship award?**

What is your overall recommendation?

☐ Recommend with Confidence ☐ Recommend ☐ Recommend with Reservations ☐ Do Not Recommend

I may have concerns about this student. Please contact me.

☐ Yes ☐ No

Preferred contact method: ☐ Phone ☐ Email

Evaluator's Name _____

Organization/Institution/Department _____

Title _____

Address _____

Phone Number _____ **Email** _____

Signature of Evaluator _____ **Date** _____