

DISTRICT 11 BASKETBALL COACHES ASSN. SCHOLARSHIP APPLICATION FORM

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1. The candidate's coach must be a current member of the District 11 Basketball Coaches Association.
 2. Scholarships shall be available to graduating students who plan to attend a college, university, or other institution of higher learning.
 3. Factors such as financial need, scholastic achievement, leadership qualities, self reliance and athletic participation shall be considered.
 4. The scholarship shall be for one (1) year and will be used for direct educational expenses only.
 5. Two \$500.00 scholarships are available annually, one for a boy and one for a girl.
 6. Winners of the scholarship shall notify the District 11 treasurer of the name of the institution in which they have enrolled. The check will be made out to the person receiving the scholarship when the treasurer has received official notice that the winner has enrolled in the school of their choice.
 7. If a winner receives an athletic or scholastic scholarship equal to or greater than one half of the academic years tuition from another source, then an alternate will become the recipient of the award.
 8. The selection of the recipients will be made by the District 11 Scholarship Committee, chaired by Bob Shoemaker.
 9. Winners will be announced and given public recognition along with their parents, at the annual District 11 Basketball All Star Game.
 10. All sections of the candidate's application are to be returned to Bob Shoemaker.
 11. ***** DEADLINE ***** Postmarked by the first Monday in March.

Send To: Bob Shoemaker
 87 Crestline Rd. SE
 Newark, OH 43056

APPLICATION FORM

DISTRICT 11 BASKETBALL COACHES ASSN. SCHOLARSHIP PROGRAM

SECTION 1 --- TO BE COMPLETED BY APPLICANT

NAME _____ SCHOOL _____

HOME ADDRESS _____ CITY _____

HOME PHONE (____) _____ ZIP CODE _____ DATE OF BIRTH _____

HAVE YOU RECEIVED CONFIRMATION OF A GRANT OR SCHOLARSHIP
EQUALING ONE HALF OR MORE OF AN ACADEMIC YEAR'S TUITION?

WRITE A SHORT ARTICLE ON WHY YOU FEEL YOU DESERVE THIS
SCHOLARSHIP. (INCLUDE SUCH FACTORS AS FINANCIAL NEED,
SCHOLASTIC ACHIEVEMENT, LEADERSHIP QUALITIES, ATHLETIC
PARTICIPATION, AND PERSONAL GOALS.)

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SECTION 2 --- TO BE COMPLETED BY GUIDANCE COUNSELOR

STUDENT'S NAME _____ DATE _____

GRADE POINT AVERAGE _____ CLASS RANK ____ OF ____ SAT _____ ACT

PLEASE ENCLOSE HIGH SCHOOL TRANSCRIPT.

ACADEMIC APPRAISAL OF STUDENT: