

# SCHOLARSHIP APPLICATION

## Bob Glassman Athletic Scholarship Fund

### 2020-2021

- ALL APPLICATION INFORMATION MUST BE TYPEWRITTEN.
- Return completed application to GUIDANCE OFFICE NO LATER THAN 4/30/2021
- SCHOLARSHIP APPLICATION REQUIREMENTS:
  - ✓ GPA of 2.3 or better
  - ✓ Meet the Criteria for NCAA Eligibility
  - ✓ Admitted to a 4-year College/University
  - ✓ Participated in Varsity Baseball or Softball

#### I. APPLICANT INFORMATION

Name \_\_\_\_\_

Complete Street Address, City, State, Zip Code

\_\_\_\_\_

Telephone Number \_\_\_\_\_

Date of birth \_\_\_\_\_ Place of birth \_\_\_\_\_

School you attend / Name and phone number of Guidance Counselor

\_\_\_\_\_

#### II. STUDENT APPLICATION CHECKLIST

Initial the checklist to confirm that the following items are included in the application package.

***\*\* (Attach all required materials to completed application using the following list as a guideline.)***

\_\_\_\_ Completed and signed application

\_\_\_\_ Two Letters of Recommendation (one must be for your Baseball or Softball Coach)

\_\_\_\_ Essay (NO MORE THAN 500 WORDS)

\_\_\_\_ Copy of Transcripts

\_\_\_\_ Letter of Acceptance to a 4 year- College/University

Name \_\_\_\_\_

### III. HIGHER EDUCATION PLANS

To which colleges have you applied?

Where have you been accepted?

Which college will you attend?

1 <sup>st</sup> choice	Tuition cost for one year	Dorming or commuting
2 <sup>nd</sup> choice	Tuition cost for one year	Dorming or commuting

What will your college major be? Do you have a vocation in mind following graduation?

### IV. PARTICIPATION IN EXTRACURRICULAR ACTIVITIES AND/OR EMPLOYMENT

Please list all extracurricular activities both inside and outside of school, i.e. clubs, athletic activities, volunteer activities. If you are an officer of any activity, please indicate.

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Are you employed? \_\_\_\_\_

Type of work / name of employer / number of hours worked per week.

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Name \_\_\_\_\_

**V. A History of your Baseball/Softball Career. Including All Honors and Accomplishments.**

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**VI. REFERENCES**

**Please list two references.**

Give names and telephone numbers. One must be from your baseball or softball coach. Indicate who they are (i.e. teacher, counselor, employer, coach, scout/club leader). Do not use relatives.

**Attach letters of reference to this application.**

**1.**

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**2.**

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Name \_\_\_\_\_

## VI. ESSAY

To this application attach an essay of **between 300 - 500 words**:

- How has baseball or softball positively affected your life?

## VII. AGREEMENTS, AUTHORIZATIONS, SIGNATURES

*In applying for this scholarship, I understand that any award made will be granted only as a credit against the expenses, including tuition fees, books, supplies, and the equipment to be used in furthering my education, in compliance with the Internal Revenue Code and Rulings.*

*In the event that other scholarship monies are awarded to the student which equal or exceed all institutional expenses and tuition, the Scholarship Committee reserves the right to designate the scholarship funds to other areas for the student's education in accordance with the Internal Revenue Code and Rulings.*

*It is my responsibility to provide the Scholarship Fund the name of the college I will attend and the address and telephone contact information for the college bursar's office so that payment may be made.*

*I hereby grant permission to the fund to receive and evaluate all my academic and other records provided to them directly or from school authorities. I further agree to make financial information available to the fund if requested.*

- **BY SIGNING, I CONFIRM THAT ALL NECESSARY INFORMATION IS INCLUDED, ALL REQUIREMENTS HAVE BEEN MET AND ALL NECESSARY SIGNATURES ARE HERE.**

Signature of applicant \_\_\_\_\_

- **THIS APPLICATION REQUIRES THE SIGNATURE OF FATHER, MOTHER OR GUARDIAN AFFIRMING KNOWLEDGE OF THIS APPLICATION.**

Signature of parent / guardian \_\_\_\_\_

Scholarship aid is offered annually to students who are graduates of Elizabeth High Schools and at the time of this application, are residents. This application is for the exclusive use of the Scholarship Committee. All information will be held in strict confidence. Contact your Guidance Office if you have any questions while completing this application.

*It should be understood that after all applications are reviewed, scholarships will be awarded at the sole discretion of the Bob Glassman "SCHOLARSHIP FUND"*