APPLICATION FOR GRADUATING HIGH SCHOOL SENIORS ACADEMIC/VOCATIONAL EDUCATION SCHOLARSHIPS FOR PLAYERS REGISTERED TO SPOKANE GIRLS FASTPITCH

Page 1 of 3

MUST BE POSTMARKED NO LATER THAN June 15th 2013

	C (Community College, College OR [AL (Trade, Technical school,	e or University degree program) etc.)	
Name			
Address		Home Phone	
City	Zip	Date of Birth	
Social Security #	Your Income \$	Source	
If dependent of a guard	dian, please check here and fill	out information below.	
Father's Name		Occupation	
Employer		Annual Salary \$	
Other Income \$	Source		
Mother's Name		Occupation	
Employer		Annual Salary \$	
Other Annual Income \$	Source		
College or Vocational School	planning to attend		
Cumulative Grade Point Aver	age(a	attach transcript)	
Activities: (School, Commun	ity and other)		

Please use the following space to explain any extenuating circumstances that may help the scholarship committee in their selection: (be specific)			
Please be sure no questions are left unanswered. If more room is needed for answers, please attach a separate $8\frac{1}{2} \times 11$ sheet (typed or printed in black ink). Do not use back of forms.			
To qualify for this scholarship, you must be a registered player in Spokane Girls Fastpitch Softball Association. All answers and statements contained herein and accompanying this application are true.			
Applicant's Signature Date			
Applicant's Signature Date NOTE: Please check that you have included:			
NOTE: Please check that you have included:			
NOTE: Please check that you have included: 2 page application 200 word goals essay Three (3) recommendations mailed to SGFSA (it is recommended that these be included			
NOTE: Please check that you have included: 2 page application 200 word goals essay Three (3) recommendations mailed to SGFSA (it is recommended that these be included with your application)			
NOTE: Please check that you have included: 2 page application 200 word goals essay Three (3) recommendations mailed to SGFSA (it is recommended that these be included with your application) Transcript(s):			

Mail completed application and documents to: (NO STAPLES PLEASE)

Spokane Girls Fastpitch Softball Association PO Box 10326 Spokane, WA 99209-1326

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Confidential Personal Recommendation for	
	(Please print)
Our scholarship committee would like your assessme scholarships. Please fill out this form and attach a se	
This recommendation is confidential; your candid apprecommendation for the applicant to receive consider	• • • • • • • • • • • • • • • • • • • •
Thank you.	
Can you, without reservation, recommend this applic	ant for a scholarship?
Comments: Please <u>do not</u> use back of forms. Type of	or print in black ink.
Vour Nama	
Your Name(Please :	print or type)
Signature	
Position	
Daytime Telephone	Date
Mail completed recommendation form to:	Spokane Girls Fastpitch Softball Association
wan completed recommendation form to:	PO Box 10326
	Spokane, WA 99209-1326