

# Scholarship



SCA has a limited amount of funds available for partial, need-based scholarships. Families that are awarded scholarships will be expected to commit to a volunteer position at the gym a minimum of two hours per week. **Application Deadline:** April 15 (THIS FORM MUST BE FILLED OUT COMPLETELY – **PLEASE PRINT**)

## **ATHLETE INFORMATION**

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age \_\_\_\_\_

Full Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

School '12-'13 \_\_\_\_\_ Grade '12-'13 \_\_\_\_\_ E-mail \_\_\_\_\_

GPA/Grade Average \_\_\_\_\_

Cheerleading/Tumbling/Dance Experience \_\_\_\_\_

Extracurricular Activities \_\_\_\_\_

## **FAMILY INFORMATION**

### ***Parent/Guardian Info***

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Full Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone # \_\_\_\_\_ Work Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_

Parent's Marital Status \_\_\_\_\_ Total Number in household \_\_\_\_\_

Total Annual Household Income \_\_\_\_\_ Have you received an SCA Scholarship before? \_\_\_\_\_

## **GENERAL INFORMATION**

1. Please explain why your family is in need of a SCA Scholarship. \_\_\_\_\_

\_\_\_\_\_

2. Why does your child deserve an SCA scholarship? \_\_\_\_\_

\_\_\_\_\_

3. What classes, camps, or activity is your child/children planning on attending at SCA? \_\_\_\_\_

\_\_\_\_\_

4. How much can your family afford to pay for your desired activity? \_\_\_\_\_

5. What volunteer position would you like to serve in at SCA? \_\_\_\_\_

Signature of Applicant \_\_\_\_\_ Date of Application \_\_\_\_\_

Amount Awarded \_\_\_\_\_ Signature of Gym Director \_\_\_\_\_