PRIDE SCHOLARSHIP APPLICATION

CONTACT INFORMATION

PLAYER NAME: _____

HOME ADDRESS:_____

STREET CITY ZIP CODE

CELL PHONE #: _____ EMAIL: _____

ACADEMIC INFORMATION

HIGH SCHOOL: _____ GRAD DATE: _____

GPA: _____

COLLEGE/UNIVERSITY YOU WILL BE ATTENDING: _____

YOUR COLLEGE/UNIVERSITY START DATE:_____

LIST ACADEMIC HONORS OR SCHOLARSHIPS RECEIVED: _____

_____

LIST OTHER SPORTS, CLUBS, ACTIVITIES YOU WERE PART OF: _____

_____

FASTPITCH SOFTBALL INFORMATION

NUMBER OF COMPLETE SEASONS YOU'VE PLAYED FOR INTER-LAKES PRIDE FASTPITCH: _____

PLEASE NOTE THAT APPLICANTS MUST HAVE PLAYED A MINIMUM OF TWO (2) COMPLETE SEASONS FOR INTER-LAKES PRIDE FASTPITCH FOR CONSIDERATION.

LIST YOUR TRAVEL SOFTBALL EXPERIENCE

SEASON(S)	TEAM	COACH
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

DID YOU PLAY HIGH SCHOOL SOFTBALL? YES NO (CIRCLE ONE)

VARSITY LETTER WINNER? YES NO (CIRCLE ONE)

REQUIRED ESSAY (PLEASE LIMIT TO 2 PAGES OR LESS)

PLEASE ATTACH AN ESSAY EXPLAINING HOW PLAYING FASTPITCH TRAVEL SOFTBALL HAS IMPACTED YOUR LIFE. PLEASE INCLUDE YOUR EXPERIENCES PLAYING FOR INTER-LAKES PRIDE FASTPITCH AS WELL.

VERIFICATION

I CERTIFY THAT THE INFORMATION I HAVE LISTED ON THIS SCHOLARSHIP APPLICATION IS BOTH TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE.

_____

PLAYER SIGNATURE DATE

REFERENCE

PLEASE LIST EITHER AN INTER-LAKES PRIDE COACH YOU'VE PLAYED FOR OR AN INTER-LAKES PRIDE BOARD MEMBER (CURRENT OR PAST) THAT CAN BE CONTACTED AS A REFERENCE ON YOUR BEHALF.

_____

REFERENCE PRINTED NAME CELL #

DEADLINE TO SUBMIT APPLICATION IS JULY 12th

ALL ENTRIES MUST BE SUBMITTED VIA EMAIL TO interlakespride@gmail.com