

Kansas Disc Sport Scholarship Foundation Student Scholarship Application for 2008

Name: _____ Address: _____
City: _____ Zip: _____ Phone: _____
Cell: _____ e-mail: _____
High School: _____ Address: _____
City: _____ Zip: _____

Mother's Name: _____ Address: _____
City: _____ State: _____ Zip: _____ Phone: _____
Father's Name: _____ Address: _____
City: _____ State: _____ Zip: _____ Phone: _____

Financial Need: (circle one)

Family Income: below \$40,000 \$40,000-\$80,000 Above \$80,000

Job History:

Most recent: _____ from: _____ to: _____
Next: _____ from: _____ to: _____
Next: _____ from: _____ to: _____

School Activities: (Sporting, Academic, Service, etc and position held if any)

Activity: _____ Position Held: _____
Activity: _____ Position Held: _____
Activity: _____ Position Held: _____
Activity: _____ Position Held: _____
Activity: _____ Position Held: _____

Out of School Activities: (Scouting, 4H, Religious, etc and position or rank achieved)

Activity: _____ Position or rank: _____
Activity: _____ Position or rank: _____
Activity: _____ Position or rank: _____

Disc Sport History: (This section is the most important factor in determining the scholarship recipient. The more you can tell us, the better your chances.)

Started Playing: Age _____ First Tournament: Age _____ Number of Tournaments Played: _____
Number of club events participated in: _____

On a separate piece of paper, address the following issues.

- List the disc sport(s) you have participated in.
- Memberships in local, regional or national organizations with member number and first year joined. Has your membership been continuous?
- Memorable accomplishments such as tournament wins, high placements or awards.
- Service to the sport: (brief explanation as to how you have helped your sport such as chalking ultimate lines or removing brush at a disc golf course or hosting an event or fund raiser)
- What does your chosen disc sport(s) mean to you?
- Is there a player that you look up to for inspiration? Why?

Recommendations: Please submit or have sent to the foundation, three recommendations. Two should be from a teacher, a boss, or a clergy; just not from someone related to you. They should discuss your character, personality and work ethic. One recommendation must be from someone involved in your chosen disc sport (may be a relative) that highlights your involvement in the sport; both play and/or volunteer hours. Please provide these people an envelope that is pre-stamped and pre-addressed to the foundation. Additional disc related recommendations are encouraged but not required.

What is your planned field of study?

What School, College, University or Trade School are you planning to attend?

(If you are chosen as the recipient, a check will be made out to the school of your choice for your benefit to help offset tuition or books or school housing. The school must be in-state for this scholarship to be valid.)

School: _____ Address: _____
City: _____ Zip: _____

Please submit a brief letter (less than a page) to the foundation stating any pertinent information that might convince the scholarship committee to select you as its recipient. This could be financial, medical, or other reasons.

I certify that all the answers I have given in this application are correct to the best of my knowledge. I understand that this information will be kept confidential and will be available only to the scholarship committee members. If I am awarded a scholarship, I authorize the Kansas Disc Sport Scholarship Foundation to publish my name and picture as a scholarship recipient. I also understand that the scholarship becomes invalid if I don't attend an in-state institution during the year of the application. Please enclose a picture (senior picture would work fine) with your application.

Student's Signature: _____ date: _____

Parent or guardian's signature of permission if applicant is under the age of 18.

School Registrar: (Please complete the following information to the best of your ability and sign)

Applicant's grade point average on a 4 point scale after 7 semesters: _____

What quartile is the applicant currently ranked among his/her graduating class? _____

Is the applicant on schedule to graduate with his/her class? Yes _____ No _____

Is the applicant currently in good standing with the school? Yes _____ No _____

Printed Name: _____ Position: _____

Signature: _____ date: _____

E-mail: _____ phone: _____

This scholarship is for students that will graduate from an accredited Kansas High School and plans to attend an in-state institution of higher learning; trade school, junior college or university. The primary criterion for this scholarship is involvement in a disc sport. Applications should be sent to: Kansas Disc Sport Scholarship Foundation; Attn: Bill Paulson; 1330 S. Meridian; Valley Center, Ks; 67147.

Applications are due by May 1st.