

Application For The Brad Weaver Memorial Scholarship

Guidelines

1. Applicant must be a current resident of Forks Township
 2. Applicant must have participated in activities sponsored by the Forks Township Youth Sports Organization for a minimum of 3 full seasons.
 3. The school of his or her choice must accept the applicant. The scholarship may be used for any college, prep school, trade school, junior college, etc acceptable to the selection committee.
- Note: Scholarship awards will be paid upon successful completion of the fall semester and minimum of 12 credit hours.
4. This application must be accompanied by the following:
 - A. Financial aid application or a copy of applicant's IRS Form 1040
 - B. A copy of parent's IRS form
 - C. A transcript furnished by the Guidance Department
 5. All applications must be completed and returned to the Forks Township Youth Organization, Forks Township Community Center, 1606 Sullivan Trail, Easton, PA, 18040 in a sealed envelope marked Scholarship Committee by March 20, 2011. BE SURE YOUR NAME, HOME ADDRESS, E-MAIL ADDRESS AND TELEPHONE NUMBER APPEAR ON ALL PAPERWORK SUBMITTED

- The selection committee will hold all financial information in the strictest confidence. Name of applicants not selected will not be divulged.
- Financial need and academic accomplishments will be the prime considerations of the selection committee. The committee reserves the right to accept or reject any or all applicants. Any false information will be grounds for rejection.
- The selection committee will determine the number and amount of scholarships to be awarded before reviewing all applications
- ALL INFORMATION WILL BE CONSIDERED CONFIDENTIAL.
- RETURN BY MARCH 20, 2011 .
- TYPE OR PRINT ON A SEPARATE SHEET THE ANSWERS TO THE QUESTIONS ON THE REVERSE SIDE OF THIS APPLICATION.
- ATTACH THIS COVER SHEET TO YOUR PAPERWORK.

The following declaration must be signed and returned with this application.

CERTIFICATION AND AUTHORIZATION - We declare that the information reported in this application is true, correct and complete to the best of our knowledge. We agree to the use of the information submitted by the scholarship committee to assist in the determination of awards. We agree that we will not protest the awards or hold the scholarship committee liable in any manner.

Signature of both parents: _____

Signature of applicant: _____ Print
Name _____

The application begins on the reverse side of this page

PLEASE ANSWER THE FOLLOWING ON A SEPARATE SHEET OF PAPER

TYPE OR PRINT YOUR ANSWERS.

STUDENT DATA

1. State the immediate and future goals you have established for yourself.
2. List any extra-curricular activities. (Include: sports, hobbies, work experience, awards, office held and awards received).
3. List the Forks Township Youth Sports Organization sponsored sports and activities that you participated in. Include years of participation.
4. List the college, prep school, trade school, junior college, etc you will attend, your date of birth, your intended major, if you have received notification of admission, if you will live at school, or commute.
5. Be sure your transcript, (provided by your current school), is attached
6. Submit a 100 word-essay entitled: "how the Forks Township Youth Sports Organization affected my life."

FINANCIAL DATA

7. List your Student Assets. (Personal savings, trust funds, etc. List amounts and how obtained)
8. List other scholarships, grants or loans. (Name and Amount)
9. Gross yearly earnings of Father, and Mother, or guardians. (Be sure to include proof of these earnings)
10. Other annual income. (Rental, investments, interest, etc. List source and amount).
11. Family assets. (Credit union, savings or checking accounts, stock, bonds, trusts, etc Specify types and amounts.)
12. Name and age of all brothers and sisters at home, Give year, major and name or school for those attending post high school programs.

MISCELLANEOUS

• PLEASE EXPLAIN ANY SPECIAL CIRCUMSTANCES OR GIVE ADDITIONAL INFORMATION THAT WOULD HELP THE COMMITTEE SELECT YOUR APPLICATION.

PLACE ALL PAPERWORK, INCLUDING THE SHEET, (SIGNED), IN A SEALED ENVELOPE MARKED SCHOLARSHIP COMMITTEE. RETURN BY MARCH 20, 2011.

RETURN TO: Guidance Office at your high school and they will forward it on to :

THE FORKS TOWNSHIP YOUTH SPORTS ORGANIZATION - Scholarship committee
FORKS TOWNSHIP COMMUNITY CENTER ,1606 Sullivan Trail, Easton, PA 18040.