



Carl Junction High School Athletic Booster Club Scholarship Application

The Carl Junction High School Athletic Booster Club will award two (2) \$1000.00 scholarships to student athletes each year. The scholarships will be awarded to assist students in pursuing further education after high school. The scholarship is in recognition of dedication, sportsmanship, leadership and academic achievement while attending Carl Junction High School.

Please return the completed application and the required documents to the Counselors Office no later than the end of the school day, **Monday, April 26, 2021**. It is the responsibility of the applicant to ensure that all documents are complete and submitted by **Monday, April 26, 2021**.

Scholarship winners will be announced at the Senior Awards Ceremony. Funds may be used for tuition, books and instructional materials and/or room and board on campus. If the recipient fails to enroll in a higher learning institution within 6 months of graduation, the scholarship will be forfeited. In that case, the award will go to the next qualified candidate.

Qualification criteria for the scholarship are:

1. Athletic Participation – Applicant must be a senior at Carl Junction High School in good standing and have participated on an athletic team.
2. Academics – Applicant must be in good academic standing, with a minimum 3.0 GPA and have enough credit hours to graduate in May of the application year.
3. Higher Education – Applicant must plan to enroll in an institution of higher learning within 6 months of graduation from Carl Junction High School.

Documents required for the scholarship application:

1. Completed scholarship application
2. Current grade report
3. Student essay
4. One recommendation from a faculty member – additional may be submitted
5. One recommendation from a coach – additional may be submitted

Parent/Guardian and Applicant Signatures

I hereby authorize that the information provided in this application is true and correct. I authorize the review of this application by the Carl Junction Booster Club, for the sole purpose of consideration for this scholarship award. **I understand that all information must be submitted to the Counselor's office by the Monday, April 26, 2021 deadline for the application to be considered.**

Parent/Guardian Signature _____

Date _____

Student Signature _____

Date _____



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Student name: _____ M _____ F _____

Parent(s)/Guardian name: _____

Address: _____

Street or P.O. Box

City

State

Zip

Applicants email address: _____

Phone #: _____ Applicants date of birth: _____

GPA: _____ Class Rank: _____

College/Trade/Technical school planning to attend: _____

Major area of study _____

Have you been accepted? _____



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Coach's Recommendation Form

Applicant's Name: _____

Coach's Name: _____ Sport: _____

Please return the completed form to the applicant in a sealed envelope.

Circle the most appropriate number (5 = highest and 1 = lowest)

| | | | | | |
|---|---|---|---|---|---|
| Demonstrates leadership | 5 | 4 | 3 | 2 | 1 |
| Dedication to the team | 5 | 4 | 3 | 2 | 1 |
| Performs to the best of his/her ability | 5 | 4 | 3 | 2 | 1 |
| Sets a positive example for the team | 5 | 4 | 3 | 2 | 1 |
| Athlete is coachable | 5 | 4 | 3 | 2 | 1 |
| Exhibits good sportsmanship | 5 | 4 | 3 | 2 | 1 |
| Level of Intensity | 5 | 4 | 3 | 2 | 1 |
| Willing to work hard to improve | 5 | 4 | 3 | 2 | 1 |

Additional comments:



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Faculty Recommendation Form

Applicant's Name: _____

Faculty's Name: _____

In what capacity do you know this student?

Please return the completed form to the applicant in a sealed envelope.

Circle the most appropriate number (5 = highest and 1 = lowest)

| | | | | | |
|--|---|---|---|---|---|
| Demonstrates leadership | 5 | 4 | 3 | 2 | 1 |
| Dedication to the classroom learning environment | 5 | 4 | 3 | 2 | 1 |
| Performs to the best of his/her ability | 5 | 4 | 3 | 2 | 1 |
| Sets a positive example in the classroom | 5 | 4 | 3 | 2 | 1 |
| Student is willing to learn | 5 | 4 | 3 | 2 | 1 |
| Exhibits good citizenship | 5 | 4 | 3 | 2 | 1 |
| Level of intensity | 5 | 4 | 3 | 2 | 1 |
| Willing to work hard to improve | 5 | 4 | 3 | 2 | 1 |

Please comment on this student's academic performance and why you would recommend him/her for this scholarship. Additional pages may be attached. **Please return to the applicant in a sealed envelope.**

