**Wolfpack Athletic Booster Club Scholarship Application**

**Due Date: April 15, 2024**

**Applicant Last Name: First Name:**

**Applicant Parent(s) or Legal Guardian(s) information**

**Name(s):**

**Street:**

**City: State: Zip:**

**Phone:**

**Grade Point Average (as of January 2024 transcript):**

**What Extra-Curricular Activities, including Community Service/Volunteer work are you involved with? (Include leadership contributions, awards, and honors received) *Additional pages may be attached***

**Student athletes are required to have a minimum of 15 hours of volunteer service during the school year to be eligible for scholarship consideration. Have you met this requirement? If yes, please detail the hours of service.**

**Name of College, University, or Technical Institute you plan to attend:**

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**Have you been accepted for admission? Yes \_\_ No \_\_**

**What major, course of study or certification do you intend to pursue? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Essay Topic (500 words Minimum): Why should you be considered for the Wolfpack Athletic Booster Club Scholarship? *Essay may be attached separately***

***(continued)***

The application due date is April 15, 2024. If sending electronically, the deadline is 11:59pm Central Time. Electronic submissions should be sent to buildthepack@outlook.com. Or, a printed copy of the application may be dropped off, in a labeled and sealed envelope, to the Athletic office no later than 4pm Central time on the same day.

The student is responsible for providing a copy of the Coach Evaluation form to the Coach they are requesting to complete the information and informing the coach of the deadline. The deadline for Coach Evaluation is Wednesday April 24, 2024. ***The Coach Evaluation is Confidential and should not be shared with the applicant.* *Submission instructions are provided to the Coaching staff through the Athletic Director’s office.***

**Statement of Accuracy**

I hereby affirm that the information provided by me is true and correct to the best of my knowledge. I hereby acknowledge that if chosen to be a recipient of a scholarship, I must provide evidence of enrollment at an institute of higher learning before the scholarship funds will be awarded:

Applicant Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_