Kaizen Softball Scholarship Program

**Application 2022**

|  | | | | Date of Application: | |
| --- | --- | --- | --- | --- | --- |
| Please **type** or **print** your answers. If the application is illegible, it will be returned to you. | | | | | |
|  | Last Name: | First Name: | | | |
|  | Mailing Address: Street:  City: State: ZIP: | | | | |
|  | Daytime Telephone Number: | | | | |
|  | Date of Birth: Month Day Year | | | | |
|  | Are you related to any members of the Kaizen Board of Directors (Please circle)  Yes No  If yes, please identify to whom you are related: | | | | |
|  | Current High School: | | | | Number of years attended: |
|  | I will be attending the following school in the Fall of 2022:  Proof of acceptance or current student enrollment from the above school is **required prior to funds being released.** | | | | |
|  | Current Grade Average:  Attach proof of Grade Average. Your most recent **official** school transcript / report card required. | | | | |
|  | Name & address of parent(s) or legal guardian(s): Use reverse side of application if you need more space. Name (s)    Street:  City:  Province:  Postal Code:    Home phone of parents or legal guardians: | | | | |
|  | Current Kaizen Team: | | Total # Years played with Kaizen Softball: | | |
|  | What specialty/major do you plan to major in as you continue your education? | | | | |

|  | List expenses you expect to incur per semester or quarter: (Approximate figures acceptable) | |
| --- | --- | --- |
|  | A. | Tuition: Amount: $ |
| B. | Books: Amount: $ |
| C. | Room & Board: Amount: $ |
| D. | Other expenses: Amount: $ (Describe below under comments) |
| Comments: | | |
|  | | |
|  | | |
|  | | |

|  | List your academic honors, awards, and membership activities while in high school: |
| --- | --- |
|  | List your community service activities, hobbies, outside interests, and extracurricular activities. |

|  | A. The following items must be attached to this application for the application to qualify to be reviewed by the scholarship committee. Your application will **not be considered** if these items are not sent along with this application. **No exceptions.**  C. Circle “YES” or “NO” to be sure you have attached each item as required. | | |
| --- | --- | --- | --- |
|  | YES | NO | Completed application. All questions are answered completely. |
| YES | NO | Letter to Scholarship Committee outlining why you should be selected for the scholarship. Must be typed. |
| YES | NO | Reference letter from at least one (1) coach in the Kaizen organization. |
| YES | NO | Reference letter from at least one (1) current educator, or an educator who has taught you within the last 2 years. \*\*OPTIONAL\*\* |
| YES | NO | Proof of post secondary institution acceptance or current student enrollment. |
| YES | NO | Most recent high school transcripts / report card. |

### STATEMENT OF ACCURACY

I hereby affirm that all the above stated information provided by me is true and correct to the best of my knowledge. I also consent that my picture may be taken and used for any purpose deemed necessary to promote the Foundation’s scholarship program.

I hereby understand that if chosen as a scholarship recipient, according to Kaizen Softball Scholarship policy, I must provide evidence of enrollment/registration at the post-secondary institution of my choice before scholarship funds can be awarded.

Signature of scholarship applicant:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of applicant’s guardian/ parent:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent signature is only required if the applicant is under the age of 18 at time of signing.