

2012 SWOSOA Classic – Scholarship Grant Application

This confidential application is the property of the Friends of the Classic Foundation

Name _____ Phone _____

Address _____ E-Mail _____

Cumulative GPA: _____

High School _____ SAT/ACT Scores: _____

Applying to the Following Colleges:

Annual Family Income Range:

- Under \$25,000
 \$25,000-\$50,000
 \$50,000 - \$75,000
 \$75,000 - \$100,000
 \$100,000-\$150,000
 Over \$150,000

Number in family
attending college now:

Other Scholarships Applied For:

Other Scholarships Received:

Nominating High School Coach, Swim/Dive Official, High School Principal/Teacher (Circle One)

Name _____ Phone _____

Signature _____ Date _____

Please attach signed letter of recommendation with reasons why this individual merits this award.

Certification of Swimming/Diving Participation – High School Coach or Swim Official (Circle One)

I hereby certify that the applicant has met the conditions of application in the sport and in the SWOSOA Classic (2 years participating in High School Swimming/Diving and 2 years participation in the Classic, one of which is the applicant's senior year).

Achievements in High School Swimming and Diving (Check all that apply):

	SWOSOA			CHAMPIONSHIPS		
	Invitationals	Classic	League	Sectional	District	State
Champion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Finalist/ T8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Qualifier/ T16	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Participant	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Number of personal bests in High School Competition: _____

(Last season plus this season)

Signature _____ Phone _____

2012 SWOSOA Classic-Scholarship Grant Application (continued)

Certification of Citizenship/leadership – Teacher/Principal/Community Leader (Circle One)

I hereby certify and recommend the applicant for the Classic Scholarship Grant based on demonstrated citizenship and leadership to the team, the high school, and the community.

Please attach no more than ONE PAGE supporting your certification/recommendation.

Name _____ Phone _____

Relationship to Applicant _____

Extracurricular Activities (Please list key contributions in addition to swimming/diving):

Applicant's Essay

Please submit a one page essay showing how Swimming/Diving affected you in high school and how the Classic Scholarship would benefit you.

Applicant's Agreement (Any modification voids this application):

I confirm that all the information in this application is, to the best of my ability, truthful and accurate. If later found to be misleading, I recognize that any awards could be revoked.

I agree that I must successfully complete my senior year, and I must remain in good standing in my community prior to entering college, or any award will be forfeit.

I permit my name and my likeness to be used by the Friends of the Classic Foundation to publicize the SWOSOA Classic and the scholarship grant program without any remuneration.

Applicant Signature * _____ Date _____

Parent/Guardian Signature * _____ Date _____

***Incomplete or unsigned applications will not be considered.**

Please submit the completed application and all attachments post-marked or email date stamped no later than **December 19, 2011 (No exceptions)** to:

**Liz Keating
2959 Alpine Terrace
Cincinnati, OH 45208
ucliza@gmail.com**