

**AGAWAM SOCCER ASSOCIATION**  
**SCHOLARSHIP APPLICATION**  
[WWW.AGAWAMSOCCER.ORG](http://WWW.AGAWAMSOCCER.ORG)

Student's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address (Include City, State & Zip): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Current GPA: \_\_\_\_\_ Class Rank: \_\_\_\_\_ NHS: Y / N

Employment Experience: 1. \_\_\_\_\_  
2. \_\_\_\_\_

Father's Name: \_\_\_\_\_ Mother's Name: \_\_\_\_\_

Employed By: \_\_\_\_\_ Employed By: \_\_\_\_\_

Have you and/or your parents ever participated in ASA Programs: Yes / No

Player (name): \_\_\_\_\_ # of years: \_\_\_\_\_

Coach (name/relation): \_\_\_\_\_ # of years: \_\_\_\_\_

Referee (name/relation): \_\_\_\_\_ # of years: \_\_\_\_\_

In what capacity and in which years did you participate in extra-curricular soccer related activities:

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

Have you received OR do you expect to receive any other financial assistance: Y / N

If so, from what other source: \_\_\_\_\_

Which college do you plan on attending: \_\_\_\_\_

Have you been accepted: Y / N What is your intended major: \_\_\_\_\_

**Criteria for applying: All applicants must be seniors who have participated in ASA Soccer as a player and/or other ASA soccer related activity such as coaching, assistant coaching and/or refereeing. A grade average of "B" or higher must be maintained.**

**On a separate attached page, please describe in detail any circumstances which may assist us in evaluating your application and a brief essay on "Why I think I deserve this Scholarship." You may use the back of this form to complete any answers from above.**

**Deadline for submission: April 1<sup>st</sup>**

**Please mail completed application to Agawam Soccer Association, P.O. Box 442, Feeding Hills, MA 01030 or email to [agawamsoccer442@outlook.com](mailto:agawamsoccer442@outlook.com).**