

**LEHIGH VALLEY SOFTBALL UMPIRES ASSOCIATION  
SCHOLARSHIP AWARD PROGRAM  
2025 APPLICATION**

**PLEASE TYPE OR PRINT CLEARLY.**

APPLICANT NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_

PARENT/GUARDIAN NAME(S): \_\_\_\_\_

HIGH SCHOOL: \_\_\_\_\_

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**PLEASE ATTACH AN UNOFFICIAL SCHOOL TRANSCRIPT**

**I. ACADEMICS**

CLASS RANK: \_\_\_\_\_ / \_\_\_\_\_

GPA: \_\_\_\_\_

**II. PLEASE LIST ANY SOFTBALL ACHIEVEMENTS DURING VARSITY CAREER  
(TEAM AWARDS, TEAM ACHIEVEMENTS, LEAGUE RECOGNITION, ETC.)**

III. PLEASE LIST ANY OTHER ATHLETIC ACHIEVEMENTS AND ACADEMIC ACHIEVEMENTS (AWARDS, ORGANIZATIONS, ETC.)

IV. BRIEFLY STATE YOUR COLLEGE/CAREER PLANS:

IV. (OPTIONAL) PLEASE INCLUDE BELOW ANY OTHER INFORMATION YOU WOULD LIKE TO SHARE BEYOND THE AREAS COVERED ON THIS APPLICATION.

**THIS FORM MUST BE SUBMITTED NO LATER THAN MONDAY, MAY 12 , 2025.**