

# Linden Athletic Boosters

## Scholarship

### Award Criteria

#### **Scholarship(s) Awarded:**

- The Linden Athletic Boosters may present up to three, non-renewable scholarships in an amount to be determined annually based on available monies. Scholarship applications must be completed in full and submitted for consideration by the specified due date. Scholarship applications must include a copy of the college acceptance letter.

#### **Eligible Applicant:**

- Graduating Linden High School senior who has been accepted into a college, university, junior college, or business/trade/technical school and has participated in a sport at Linden High School. If an athlete is receiving an athletic scholarship from a college that athlete is ineligible to receive the athletic booster scholarship.

#### **Criteria for Selection:**

- Athletic Participation
- Volunteerism
- Scholastic Achievement
- Extra-Curricular Activities
- Citizenship

#### **Selection Committee:**

- President, Vice President, Treasurer and Secretary of The Linden Athletic Boosters

#### **Award Announcement:**

- Scholarships will be presented at the Seniors Honors Assembly.

#### **Application Deadline:**

- **Friday, March 22, 2019**
- Turn application in to the Counseling Office





## Linden Athletic Boosters

P.O. Box 2  
Linden, MI 48450

Dear Parent/Guardians:

The Linden Athletic Boosters are pleased to announce the "Linden Athletic Boosters Athletic Scholarships." The scholarships will be awarded to one or more Linden High School student athletes from this year's graduating senior class. The scholarship recipient(s) will be selected by specific criteria established by the Athletic Boosters which is detailed on the attached "Linden Athletic Boosters Athletic Scholarship Criteria." These scholarship awards are made possible due to the volunteer fund raising efforts of the members of the Linden Athletic Booster organization.

Applications for the scholarships need to be submitted to the Linden High School Counseling Office prior to or on the date due. The **quality** and **completeness** of the application will serve as a key component of the selection process. The Linden Athletic Boosters strongly encourage all eligible student athletes to apply.

Should you have any questions or require additional information, please contact the Athletic Office or email the Athletic Boosters Board of Directors at [directors@lindenathleticboosters.com](mailto:directors@lindenathleticboosters.com).

Sincerely,

**Linden Athletic Boosters**  
**Board of Directors**

Linden Athletic Boosters  
Scholarship Application

Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Last First Middle Initial Month/Day/Year

Address: \_\_\_\_\_  
Number Street Name City Zip Code

Father/Guardian Name: \_\_\_\_\_  
Last Name First Name

Mother/Guardian Name: \_\_\_\_\_  
Last Name First Name

Have you applied for college/vocational school: \_\_\_\_\_ Accepted: \_\_\_\_\_ Yes \_\_\_\_\_ No  
Yes or No

College/Vocational School you will be attending: \_\_\_\_\_  
Complete Name of College/Vocational School

Campus Location: \_\_\_\_\_ Program of study: \_\_\_\_\_  
City State Major

Scholarship will be made payable to your College/Vocational School.

Please list extra-curricular activities (include volunteerism, school, community, employment):

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Please attach a separate essay describing any special circumstances you believe qualify you as a recipient of this scholarship.