



WEST BRADFORD YOUTH ATHLETICS SCHOLAR ATHLETE AWARD APPLICATION

The purpose of the WBYA Scholar Athlete Program is to recognize graduating senior students who have participated in WBYA team athletics. Students chosen will receive a plaque and a monetary award.

The WBYA Scholar Athlete Committee will select scholar athletes with demonstrated involvement in WBYA athletics and academic achievement. The WBYA Scholar Athlete Committee is looking for students that demonstrate a balance in academics and athletics.

A candidate may apply for the WBYA Scholar Athlete Award if he/she is graduating in the current year, with a minimum GPA of 3.0 and will be attending a two or four year College, University, or Vocational – Technical School during the upcoming school year. Candidates must have participated in WBYA sports for at least 3 seasons.

DIRECTIONS

Applicants must complete the application in its entirety and return it to the high school guidance department. Failure to complete each section will result in disqualification.

The selection of the recipient and all decisions of the WBYA Scholar Athlete Committee will be final.

APPLICATION DATA

Name _____

Date of Birth ____/____/____

Parent's Names _____

Date ____/____/____ Telephone ____ - ____ - ____

College or Vo-Tech Planning to Attend _____

MAILING ADDRESS

Street _____ Apt. No. _____

City _____ State _____ Zip Code _____

HIGH SCHOOL DATA

High School Name _____

Address _____

City _____ State _____ Zip _____

Expected Graduation Date _____

Cumulative Grade Point Average – 4.0 scale (as verified by guidance counselor) _____

Guidance Counselor Signature _____

*All DASD Students please note: A counselor will sign off on your application after you submit your application to the career center by DASD’s deadline.

CERTIFICATION

In submitting this application, I certify that the information provided is complete and accurate to the best of my knowledge.

Applicant’s Signature _____ Date ____/____/____

SPONSORSHIP

I am a non-family member familiar with the applicant’s participation in WBYA team athletics and will attest that this individual has participated in a minimum of three (3) years in WBYA team athletics.

Sponsor’s WBYA Involvement: _____

Sponsor’s Name (printed) _____

Sponsor Signature _____ Date ____/____/____

For Questions Concerning Applications

Please Contact:

WBYA @ office@wbya.org

PERSONAL STATEMENT

Please attach a typed essay describing how participation in WBYA has influenced your life and how that involvement will inspire you moving forward.