



COASTAL BEND YOUTH SOCCER ASSOCIATION 2019 HIGH SCHOOL SCHOLARSHIPS

Coastal Bend High School Seniors,

The Coastal Bend Youth Soccer Association (CBYSA) coordinates youth soccer activities in the Coastal Bend region and is dedicated to promoting the sport for children from ages four to eighteen. Part of our mission is to also promote the ideals associated with soccer, which include teamwork, community involvement, and of course athleticism. As part of this endeavor, CBYSA annually honors high school seniors that exemplify these ideals by awarding college scholarships that are funded by our annual Thanksgiving Tournament.

Each year, applicants complete the attached form and provide the required transcripts, essays, and letters that are then reviewed by a CBYSA committee. The applicants are ranked and up to four scholarships are typically awarded. This year, there is a new category and the top ranked applicant will receive the Canon L. Swim Memorial Scholarship. Canon Swim was a high school soccer player that exemplified all aspects of participation in soccer, as well as community service, that CBYSA seeks to honor. Not only was she a star soccer player, but she was a referee, helped with field maintenance, and was highly involved in volunteering inside and outside of soccer.

If you have any questions about the program or what to provide, please contact our Executive Administrator, Monica Hatton (monpenhat@yahoo.com).

Thank you for your participation in this great sport that we all love.

Cameron Perry
CBYSA 2nd Vice President and Scholarship Committee Chair

COASTAL BEND YOUTH SOCCER ASSOCIATION 2019 SCHOLARSHIP APPLICATION

PERSONAL INFORMATION:

FULL NAME:

Last

First

Middle

SEX: MALE ___ FEMALE ___ DATE OF BIRTH ___/___/___

STREET ADDRESS: _____

CITY: _____ ZIP CODE: _____

PHONE NUMBER: (____) ____ - _____

FATHER'S NAME: _____ MOTHER'S NAME: _____

YOUTH SOCCER INVOLVEMENT:

CBYSA PARTICIPATION

Name of League/Club	Years Participated	Position(s)	Honors

NUMBER OF YEARS PARTICIPATED IN CBYSA: SPECIFY YEAR(S): _____

NON-CBYSA YOUTH SOCCER PARTICIPATION

Name Of League/Association	Year(s) Participated	Reason

HIGH SCHOOL SOCCER ATHLETIC PARTICIPATION:

School	Years Participated	Position(s)	Varsity/JV/Honors

NON-SOCCER ATHLETIC PARTICIPATION:

(EXAMPLE: Other sports you participated in with a club or in school)

Activity	Years Participated	Hour(s) per Week	Description of Duties

SOCCER RELATED PARTICIPATION - COMMUNITY SERVICE:

(EXAMPLE: Referee, volunteer at club, fundraising, coaching, field maintenance, training, etc.)

Activity	Years Participated	Hour(s) per Week	Description of Duties

COMMUNITY SERVICE OR OTHER UIL ACTIVITIES:

(EXAMPLE: Debate, academic decathlon, school clubs/activities, scouts, student council, volunteering, etc. and the year(s) you participated.)

Community Service/Activity	Years Participated	Hour(s) per Week	Your Specific Role

List major honors or distinctions, in order of importance to you, received both in and out of school during grades 9 – 12 (note year received). Please include type of competition (local, state, national; how many competed for the award; financial or honorary recognition awarded, etc.)

Name Of Award	Year Received & Grade Level	Brief Description of Competition

EMPLOYMENT BACKGROUND:

Tell us about the jobs you have held or are holding and provide dates of employment, hours per week, and a brief description of your position and responsibilities. (Past Two Years Only)

Job Title	Dates of Employment	Hours per Week	Description Of Position/Responsibilities

ARE THERE ANY EXTENUATING CIRCUMSTANCES THAT YOU WOULD LIKE THE COMMITTEE TO CONSIDER CONCERNING YOUR FINANCIAL NEED?

HIGH SCHOOL INFORMATION:

(YOUR COUNSELOR MAY NEED TO PROVIDE THIS INFORMATION)

HIGH SCHOOL: _____ GRADUATION DATE: _____

PRINCIPAL: _____ COUNSELOR: _____

G.P.A.: _____ G.P.A. WITH HONORS: _____ ACADEMIC RANKING: _____ OUT OF _____

G.P.A. IS BASED ON A SCALE OF: 4.0 _____ 5.0 _____ (CHECK ONE)

***NOTE: A photocopy of your transcript MUST be included with your Application.**

COLLEGE(S) APPLIED TO: _____	ACCEPTED: ___ YES ___ NO
_____	ACCEPTED: ___ YES ___ NO
_____	ACCEPTED: ___ YES ___ NO
_____	ACCEPTED: ___ YES ___ NO

DESIRED COLLEGE MAJOR: _____ (OR ENTER "UNDECLARED")

IF YOU HAVE BEEN NOTIFIED OF A SCHOLARSHIP ACCEPTANCE, PLEASE LIST THE SCHOLARSHIP:

ARE YOU GOING TO PARTICIPATE ON A SOCCER TEAM DURING COLLEGE, EITHER COLLEGIATE OR CLUB?:

MANDATORY ITEMS:

1. HIGH SCHOOL TRANSCRIPT (A photocopy, which includes the Fall 2018 semester attached.)
2. PERSONAL LETTER (Attach a personal essay about yourself and your future goals.)
3. RECOMMENDATION LETTERS (From coaches or teachers, past or present or a significant community member with a telephone number for contact – a minimum of 3 must be attached, but no more than 5 will be considered.)
4. LEAGUE/CLUB OFFICIAL LETTER (Substantiating your involvement – can also serve as a recommendation letter.)
5. COMPLETED AND SIGNED APPLICATION (see Certification/Authorization below.)

FORM MUST BE POSTMARKED/EMAILED NO LATER THAN 4/19/19.

MAIL TO:
CBYSA SCHOLARSHIP COMMITTEE
P.O. Box 895
Corpus Christi, Texas 78403

or

EMAIL TO: monpenhat@yahoo.com

CERTIFICATION/AUTHORIZATION

I certify that the information on this application is accurate and complete and understand that the submission of false information is grounds for rejection of my application, and withdrawal of any offer of acceptance.

I authorize my respective High School Registrar's Office to release/provide a certified copy of my current high school transcript to the CBYSA Scholarship Committee or an official representative of CBYSA.

Player's Signature _____ **Date:** _____

Parent/Guardian's Signature: _____ **Date:** _____

NOTE: Parent/Guardian's Signature is required if player is under the age of 18.