

## **2016 Stow-Munroe Falls Booster Club Scholarship Application**

The Stow-Munroe Falls Booster Club provides a minimum of four (two boys and two girls) non-renewable \$1000 scholarships to Stow-Munroe Falls High School seniors pursuing post-secondary studies including professional, vocational, and academic studies not limited to colleges and universities.

### **Eligibility:**

- 1. Graduating senior.**
- 2. Minimum GPA of 2.50.**
- 3. Must have participated in a least one varsity sport.**
- 4. Parent(s) must be a current Booster Club member(s) as of January 31, 2016 and have been a member of the Booster Club at least one additional year during the last four years.**
- 5. Recipient must attend Awards Recognition Program to receive award.**

The scholarship application consists of:

- 1. Student Application**
- 2. Parental Involvement Form**
- 3. Teacher Recommendation Form**
- 4. Coach Recommendation Form**

Completed applications may be dropped off at the School Counseling Office or mailed to:

**Teresa Miller, School Counselor  
Stow-Munroe Falls High School  
3227 Graham Road  
Stow, OH 44224**

The application deadline is April 1, 2016. The recipient of this scholarship must attend the Stow-Munroe Senior Scholarship Program on May 19, 2016 to receive the scholarship.

# 2016 Stow-Munroe Falls Booster Club Scholarship Application

## Student Application

Student Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

School You Plan to Attend: \_\_\_\_\_

Intended Major: \_\_\_\_\_

1) High School Athletic Teams/Awards \_\_\_\_\_ Grade \_\_\_\_\_

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**2) Other Activities—including school clubs and activities, volunteering/community service, and employment. Also list any school and community achievements and awards**

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**3) What advice would you give a freshman entering Stow-Munroe Falls High School today about participating on a co-curricular athletic team? Please attach a typed essay.**

**(4) Please list the names of the teacher and coach you asked to provide recommendations.**

Teacher \_\_\_\_\_ Coach \_\_\_\_\_

**(5) I certify that the information included in this application is accurate and complete to the best of my ability and I understand that the scholarship funds will be paid after proof of registration to the college or university has been provided.**

\_\_\_\_\_  
Applicant signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Please print name

\_\_\_\_\_  
E-mail address



# 2016 Stow-Munroe Falls Booster Club Scholarship Application

## Teacher Recommendation Form

\_\_\_\_\_  
Teacher Name

\_\_\_\_\_ is applying for the Stow-Munroe Falls Booster Club Athletic Scholarship and has requested your evaluation and recommendation.

**Please complete and return this form to the Booster Club mailbox in the athletic Department by April 1, 2016 or mail it to: Stow-Munroe Falls Booster Club, P.O. Box 1445, Stow, OH 44224.**

Thank you for your time.

Student Qualities	Excellent	Good	Fair	Poor
Dependability	_____	_____	_____	_____
Ability	_____	_____	_____	_____
Judgment	_____	_____	_____	_____
Character	_____	_____	_____	_____
Leadership	_____	_____	_____	_____
Attitude	_____	_____	_____	_____

Briefly comment on why you feel this student deserves a Booster Club Athletic Scholarship. Please limit comments to the space provided.

\_\_\_\_\_  
Teacher signature

\_\_\_\_\_  
Date

# 2016 Stow-Munroe Falls Booster Club Scholarship Application

## Coach Recommendation Form

\_\_\_\_\_;  
Coach Name Sport

\_\_\_\_\_ is applying for the Stow-Munroe Falls Booster Club Athletic Scholarship and has requested your evaluation and recommendation.

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Thank you for your time.

Student Qualities	Excellent	Good	Fair	Poor
Outstanding athlete	_____	_____	_____	_____
Enthusiasm	_____	_____	_____	_____
Leadership	_____	_____	_____	_____
Determination to succeed	_____	_____	_____	_____
Improvement over the season	_____	_____	_____	_____
Positive role model	_____	_____	_____	_____

Briefly comment on why you feel this student deserves a Booster Club Athletic Scholarship. Please limit comments to the space provided.

\_\_\_\_\_  
Coach's signature

\_\_\_\_\_  
Date