

VIPER NATION

— EDUCATION FOUNDATION —

Your Academic Booster

Strong Minds. Strong Bodies.
Coaches Scholarship Application 2019
Canyon Ridge & Four Points Middle Schools Graduates

The *Strong Bodies Strong Minds* Scholarship: VNEF will award one (1) \$1,000 scholarship to an athlete from Vandegrift High School who participated in athletics at and graduated from Canyon Ridge Middle School and one (1) \$1,000 scholarship to an athlete from Vandegrift High School who participated in athletics at and graduated from Four Points Middle School. Candidates will be chosen on the basis of academic standing and answers to questions in the application and essay. These scholarships were made possible from "Pie Your Coach" fundraisers held in 2015.

Requirements for all scholarships:

1. Students must be current full-time seniors attending Vandegrift High School.
2. Students must have participated in athletics and graduated from either Canyon Ridge Middle School or Four Points Middle School.
3. Scholarship recipients must plan to be enrolled full time in a four-year college or university during the summer term or fall semester immediately after receiving this scholarship.
4. Minimum GPA of 3.5 as documented by the VHS transcript. **Please attach an unofficial copy of the high school transcript to this application.**
5. Complete the entire **Scholarship Application**.
6. Complete the **Essay**: In 250 words, describe one or more experiences you have had which demonstrate how the coaching/athletic experience and education you received is preparing you to conquer future challenges. **Attach essay to this application.**
7. Attach a **Resume**.
8. Late or incomplete applications will not be accepted nor considered.

**Completed application should be submitted to the VHS Counseling Office
by 4:00 pm on Tuesday, April 30th, 2019.**

Applicant Name: _____

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Which college or university are you planning to attend? _____

What will be your major or course of study? _____

If needed, please use additional paper for any part of this application.

Extracurricular Activities & Off-Campus Organizations (Band//Athletics/Dance/Cheer/Club Sports/etc.)

Community Service/Volunteer Work

Awards/Honors earned while attending Vandegrift High School

Are there any financial need considerations of which the selection committee should be aware?

Applicant Name: _____

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Selection: A committee of educators and VNEF Scholarship Committee Members will evaluate applications and award scholarships. Scholarship recipients will be announced on May 22, 2019, at VHS Senior Awards Ceremony. Checks will be dispersed directly to the Finance Office at the student's designated institution by 06/28/19. The full scholarship amount will be credited directly into the student's account. Awardees will be required to fill out pertinent college information.

Student's Pledge:

"I have read and understand the conditions of application and acceptance of a scholarship from Viper Nation Education Foundation. I understand that should I be chosen as a scholarship recipient, I must be a full-time college student during the summer term and/or the fall semester following the scholarship award and I give the Foundation the right to publish my name as the recipient of a scholarship. I certify that all information submitted herewith is true and correct."

Student Signature _____ Date _____

Student Name _____

Intended Major _____

School of Acceptance _____

Mailing Address _____ (for summer prior to college)

Home Phone _____ Cell Phone _____

Email _____

Parent(s) Name(s) _____

Parent(s) Email(s) _____

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TO BE COMPLETED BY STUDENT AND CONFIRMED BY VHS COUNSELOR

Documents Checklist:

Completed application: Yes _____ No _____

High school transcripts: Yes _____ No _____

Essay: Yes _____ No _____

Resume: Yes _____ No _____

Quantitative information:

GPA: _____ Class Rank: _____

Highest SAT score: Critical Reading: _____ Math: _____ Composite: _____

OR

Highest ACT score: English: _____ Math: _____ Reading: _____ Science: _____
Composite: _____

AP coursework related to field of study: _____

Counselor's name: _____

Signature: _____ Date: _____

Comments: _____
