

West Wilkes High School Athletic Booster Club Scholarship Guidelines

- **The West Wilkes Athletic Boosters Club Scholarship is for \$1000.00. The money will be paid directly to the college of university in the winner's name.**
- **Application deadline will be determined yearly based on the date of the awards ceremony.**

In selecting scholarship recipients the selection committee will consider the following.

1. Student/Athlete must be a Senior.
2. Student/Athlete must have participated in athletics at West Wilkes High School during the current school year.
3. Student/Athlete's family must be members and actively participating in the Athletic Booster Club.
4. Student/Athlete's record of leadership and leadership qualities.
5. Student/Athlete's School Spirit.
6. Student/Athlete's Community Service.
7. Academic performance and need will be considered but are not necessarily the determining factors in the decision.

The Selection Committee will consist of the following:

1. Principal
2. Assistant Principal
3. Athletic Director
4. Athletic Booster Club President
5. Executive Committee Member (Club Vice President)
6. Executive Committee Member (Club Treasurer)
7. Executive Committee Member (Club Secretary)

All applications will be previewed by the Athletic Booster Club Executive Committee to verify eligibility. Applications will then be evaluated by the Selection Committee above.

WEST WILKES ATHLETIC BOOSTERS CLUB

SCHOLARSHIP APPLICATION

NAME: _____
Last First Middle

HOME ADDRESS: _____
(P.O. Box, Route & Box, Street) City

STATE: _____ ZIP CODE _____ PHONE: () _____

DATE OF BIRTH _____ ARE YOU A WEST WILKES ATHLETE? _____

COLLEGE YOU PLAN TO ATTEND _____ INTENDED MAJOR _____

FATHER OR GUARDIAN _____ PHONE _____

COMPLETE ADDRESS _____

EMPLOYER _____

MOTHER OR GUARDIAN _____ PHONE _____

COMPLETE ADDRESS _____

EMPLOYER _____

HAVE YOU RECEIVED ANY OTHER SCHOLARSHIPS? _____

IF "YES" PLEASE SPECIFY _____

APPLICANTS SHOULD RETURN COMPLETED APPLICATION TO THE GUIDANCE OFFICE ALONG WITH A DETAILED LIST OF ACTIVITIES THEY HAVE BEEN INVOLVED IN DURING THEIR SCHOOL YEARS. APPLICATIONS WILL BE CONSIDERED INCOMPLETE WITHOUT ACTIVITIES SHEET.

APPLICANTS SIGNATURE _____ DATE _____

PARENT OF GUARDIAN SIGNATURE _____ DATE _____