#### OASA SCHOLARSHIP APPLICATION

The Ontario Amateur Softball Association has a scholarship program rewarding the scholastic and academic excellence of players at the OASA Midget and Junior level enrolled in either a community college or university. It is funded by a plan that accepts donations and receives significant proceeds from the Jack Cook Classic held each July.

### APPLICATION FORM

#### GUIDELINES

 Applications must be submitted by Sept. 1st of the year in which the scholarship is to be awarded to:

Randy Bridge
OASA Secretary
100 West Deane Park Drive
Etobicoke, ON
M9B 2S3

- The application must be completed in full. Please type or print clearly.
- The application must be accompanied by acceptance letters from the community college or university being attended
- The application must be accompanied by a transcript of the applicant's high school marks
- Components of the application

• Part One: Personal information

Part Two: Educational status and achievements
 Part Three: Athletic endeavours and achievements
 Part Four: Community involvement and achievements

Part Five: Additional information

• Part Six: Manager/coach testimonials and comments

- We encourage you to attach any additional information which will support this application
- Note: eligibility is limited to players who have played at either the Midget or Junior level in the year in which the scholarship is to be awarded

Year	of	ann	licati	on:	200	
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# **Personal Information** Name: Citizenship if other than Canadian: Address: \_\_\_\_ [full street address] Postal code: \_\_\_\_ [municipality] Telephone #: \_\_\_ - \_\_\_ Email: \_\_\_\_\_ Educational status and achievements College / University being attended: Course/major area of study: \_\_\_\_\_ Educational achievements: High school: College/ University: Athletic endeavours and achievements Sport Team Year Accomplishment Community involvement and achievements Organization Year Achievements/comments

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Additional information in support of this application:							
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Declara	ation by the applicant						
		y make application for an Ontario f of, and companying it is complete and to	o Amateur Softball Association and declare that the information rue to the best of our knowledge and				
	[DATE]	[NAME - PRINTED]	[SIGNATURE]				
	[DATE]	[NAME - PRINTED]	[SIGNATURE]				
Team i	manager/coach test	imonial(s) and comments. (Car	n be more than one manager or				
	comment on this ath ner quality relevant to		eadership and sportsmanship and				
[D/	ATE] [N	AME AND POSITION]	[SIGNATURE]				