



CYFA FOOTBALL SCHOLARSHIP



STUDENT PROFILE

Student's Name: _____ DOB: _____

Parents' Name (s): _____

Address: _____

Street

City

State

Zip Code

Home Phone: (____) _____ Other Phone: (____) _____

Email Address (es): _____

- **ALL APPLICATIONS MUST BE RECEIVED NO LATER THAN:
June 1st, 2009**

I understand that it is my responsibility to provide the scholarship committee with complete and accurate information. It is also my responsibility to provide CYFA with the required information from the university in order for the treasurer to forward the funds directly to the financial aid office.

Student's Signature

Date



COLLEGE INFORMATION

1. List the colleges to which you have applied.

2. List any colleges where you have been accepted.

3. Have you received any other scholarships? _____ If so, please list.

4. Describe your means of college financial support.

 **ADDITIONAL INFORMATION** (use back if necessary)

1. Provide additional information, facts, or extenuating circumstances that may assist the Selection Committee during the evaluation process.

 **SCHOLARSHIP STATEMENT**

Why is the CYFA scholarship important to you?

Recommender's Name: _____ Relationship to Player: _____



CYFA FOOTBALL SCHOLARSHIP RECOMMENDATION FORM



	Below Average	Average	Above Average	Out-standing	Top Few Encountered	N/A or Not Sure
Academic Motivation						
Work Ethic						
Community Service						
Discipline-Behavior						
Citizenship						
Leadership						
Potential for Growth						

Comments: (use back or another page if necessary)

Contact information:

Recommender's Signature: _____ Date: _____

Recommender's Name: _____ Relationship to Player: _____



CYFA FOOTBALL SCHOLARSHIP RECOMMENDATION FORM



	Below Average	Average	Above Average	Out-standing	Top Few Encountered	N/A or Not Sure
Academic Motivation						
Work Ethic						
Community Service						
Discipline-Behavior						
Citizenship						
Leadership						
Potential for Growth						

Comments: (use back or another page if necessary)

Contact information:

Recommender's Signature: _____ Date: _____

Recommender's Name: _____ Relationship to Player: _____



**CYFA FOOTBALL SCHOLARSHIP
RECOMMENDATION FORM**



	Below Average	Average	Above Average	Out-standing	Top Few Encountered	N/A or Not Sure
Academic Motivation						
Work Ethic						
Community Service						
Discipline-Behavior						
Citizenship						
Leadership						
Potential for Growth						

Comments: (use back or another page if necessary)

Contact information:

Recommender's Signature: _____ Date: _____