



# Kearney Slow Pitch Softball Association

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## **Scholarship Application**

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KSPSA Scholarship Committee  
PO Box 2615  
Kearney, NE 68848-2615

**Personal Information**

Name \_\_\_\_\_ Social Security # \_\_\_\_\_  
                    First                      Initial                      Last

Home Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Current Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone # \_\_\_\_\_ Current Phone # \_\_\_\_\_

Birthdate \_\_\_\_\_

Parent(s) Names \_\_\_\_\_  
  Father    Mother

Place of Employment \_\_\_\_\_  
  Father    Mother

Family Size \_\_\_\_\_ Number in High School \_\_\_\_\_ Number in College \_\_\_\_\_

Name & Age of Other Children \_\_\_\_\_

Do You Work Part Time \_\_\_\_\_ Full Time \_\_\_\_\_ Hours Worked Per Week \_\_\_\_\_

Place of Employment \_\_\_\_\_ Job Title \_\_\_\_\_

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**School Information**

High School \_\_\_\_\_ H.S. Graduation Date \_\_\_\_\_

Institution Attending or Plan to Attend \_\_\_\_\_

Anticipated Occupation Upon College Graduation \_\_\_\_\_

Anticipated College Graduation Date \_\_\_\_\_

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**Kearney Slow Pitch Softball Association Participation**

Years Affiliated with the Kearney Slow Pitch Softball Association \_\_\_\_\_

Were You a Player \_\_\_\_\_ Umpire \_\_\_\_\_ Manager \_\_\_\_\_ Other \_\_\_\_\_

Name of Softball Team \_\_\_\_\_

Team Managers Name & Address \_\_\_\_\_

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List Special Honors or Awards Received \_\_\_\_\_

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List Major Activities, Experiences, and Contributions:

School \_\_\_\_\_

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Community \_\_\_\_\_

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Include three (3) written references addressing the following areas. References should state their relationship to you and may not include immediate family members. One reference must be a school instructor, counselor, or administrator.

1. Need
2. School Activities
3. Community Activities
4. Personal Qualities

This application must be accompanied by your letter explaining why you feel you should be considered for this scholarship. Include a paragraph stating why the scholarship is needed.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

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The Kearney Slow Pitch Softball Scholarship Program was established to award annual \$300 scholarships to association (KSPSA) members or members of their immediate family who desire to continue their education. Funds are made available through tournament sponsors and private donations.

If for any reason the original recipient can not accept the scholarship, it will be awarded to an alternate.

Application and letters of reference must be returned to the above address on or before **May 15<sup>th</sup>**.

Preference will be given to first time applicants.

This form may be reproduced as needed.

## **A. Application Criteria**

1. Scholarships must be used in a post-secondary or 4-year institution.
2. Applicant or an immediate family member participant must have been a member of KSPSA the past year as a player, team manager, umpire, or KSPSA official.
3. Applicant must be at least a senior in high school or enrolled as a fulltime student in a post-secondary or 4-year institution.

## **B. Scholarship Committee Responsibilities**

1. The committee will review, prioritize, and approve applications.
2. The committee will confirm applicant's affiliation with KSPSA.
3. Annually, the committee will award at least two \$300 scholarships.

## **C. Requesting Scholarship Payment**

1. Upon enrollment in a school of higher education, the applicant may request payment of the scholarship from the Kearney Slow Pitch Softball Association by providing documentation of enrollment from the Office of the Registrar.
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