

# Southhill Soccer Club

## 2010 Scholarship Application

The Southhill Soccer Club (SHSC) Fund was established to help players and their families who need assistance meeting the financial commitment to play Select Soccer in the SHSC Revolution Program. Each year the SHSC Board prior to the beginning of the season will make a determination on the number of scholarships to be awarded as well as the Dollar Amount for each scholarship. Our goal is to assist players regardless of race, color, nationality or ethnic origin.

### Application Process

Players and their families download the application form from our website. Once the form is completed in its entirety it should be mailed directly to, P.O. Box 731502, Puyallup, Washington 98373. ***Applications must be post marked no later than June 15, 2010 to be accepted/or review.*** All scholarship information provided will be kept in the strictest of confidence. Once all applications have been received the Revolution Advisory Board will review all applications and make their decisions.

Each applicant must complete in full the scholarship form and provide a photocopy of previous years Federal Income Tax Return. To be considered the application must be completed in full.

The Revolution Advisory Board will make all decisions within 2-3 weeks after the June 15<sup>th</sup>, 2010 deadline. Any applications that are not submitted by the June 15<sup>th</sup> deadline will not be considered for the seasons scholarship program and will not be held over for the following season. Only those applications that meet the deadline will be kept on file for the season. The Scholarship Committee of SHSC will notify each applicant of the committee's decision by July 1, 2010.

Uniform payments must still be made and are not considered a part of the scholarship fund.

If you have any questions regarding the Scholarship Application Process, please contact Mart Mitchell. Mart's contact information can be found on [www.ShscSoccer.com](http://www.ShscSoccer.com)

# SOUTHILL REVOLUTION SCHOLARSHIP APPLICATION

Player: \_\_\_\_\_ Age: \_\_\_\_\_

Team you play for: \_\_\_\_\_

## Parent/Guardian responsible for the Player:

Name \_\_\_\_\_ Relationship to Player \_\_\_\_\_

Street Address \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Employer: \_\_\_\_\_

Does the Player reside with this parent/guardian? **YES NO**

Marital Status of Parents: \_\_\_\_\_

Number and Ages of Children residing in the home that you have Primary financial responsibility over:

_____	_____
_____	_____
_____	_____

Have you had any circumstances change in your home that are not reflected on your tax return?  
**YES NO**

If Yes, please explain:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Your Residence: **RENT**    **OWN**    **LIVE W/ FAMILY MEMBER**

Monthly Amount: \_\_\_\_\_

Do you have Day Care/Pre School Expenses? **YES**    **NO**

Please write one paragraph explaining why you are requesting this scholarship:

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Please write one paragraph explaining why you hope your child will gain from participating in the Revolution Soccer Program:

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Are you willing to help with fundraising for the club? **YES**    **NO**

If yes, what areas can you help with: \_\_\_\_\_

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Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

*(Only parents/guardians who live with the player and/or are financially responsible must sign.)*