Name: League:	
Name: League:	



Little Miss Kickball Scholarship Application Form

READ THESE INSTRUCTIONS BEFORE COMPLETING FORM!

INFORMATION

Little Miss Kickball is pleased to offer Scholarships to selected candidates. Through the efforts of many volunteers (coaches, umpires, concession stand workers and board members), funds are available to young women to continue their education.

Candidates must have graduated from high school or its equivalent before July 1st of the year in which they will use the scholarship. They must have sufficient academic credit to be accepted by an accredited college, junior or community college, or a technical institute. Students already enrolled are also eligible to apply. Only players with at least four seasons of Little Miss Kickball League play (they do not have to be consecutive) are eligible for an award.

Judges will evaluate academic success, interests, special abilities, financial need, and other factors in arriving at their choice of scholarship recipients.

INSTRUCTIONS (Deadline is April 20th!)

This application form needs to be mailed to the Little Miss Kickball address shown on page 4. It must be postmarked by **April 20**th of the year of the award. Applications received after this date will not be reviewed.

In addition to the completed application, Little Miss Kickball needs the following two items submitted **by May** 15th:

- 1. An official transcript of grades and credits through the first semester of your senior year. GPA, class rank, and SAT/ACT scores should be on the transcript. HOWEVER, provide a copy of your SAT/ACT results anyway (see question 11).
- 2. Letters of recommendation from a Little Miss Kickball board member, coach, and a general reference letter from a teacher, family friend, or employer are required (see question 14).

ALL OF THESE ITEMS MUST BE POSTMARKED BY THE SPECIFIED DATE BY THE U.S. POST OFFICE (NOT AN INDIVIDUAL METER POSTMARK). HAND DELIVERIES WILL NOT BE ACCEPTED.

Please use a typewriter or a ballpoint pen. If you need more space to answer a question, use a blank piece of paper. Make sure your name appears on all attachments and extra pages. Staple (not paper clip) pages together and mail in a large manila envelope. Anything mailed separately to LMKII (transcripts/reference letters, ACT/SAT results) must include your name and address. Incomplete or blank answers may hurt your evaluation.

After selection and notification, the awardee will need to provide LMKI registration information from their selected college. LMKII will disburse scholarship funds directly to the college.

Awardees are eligible for support for up to four years, depending on the availability of funds. After being initially selected, returning awardees need to supply LMKI with a copy of their most recent semester transcript showing progress towards graduation. Again, LMKII will disburse funds to the educational institution.

NOTE: IT IS VERY IMPORTANT TO ANSWER <u>ALL</u> QUESTIONS FULLY. BLANK ANSWERS MAY HAVE A NEGATIVE EFFECT ON YOUR SCORE.

1.	Name:					
_		ast	First	Middle		
2.	Home Address:	Street	City	, I X Zip		
3.				(Age as of April 20)		
	Social Security #:					
4.			•	_ City:		
	Graduation Date:					
	GPA GPA					
5.	If you have attended or ar					
	Name of Callaga.					
				Dates:		
	Major field of study:					
6.	If you have attended any					
	,	, 5				
7.						
				of study:		
8.	If you have submitted applications to one or more colleges, but have not yet been accepted, list them here:					
9.	List any academic honors	you have received	in high school or	college:		
10.	school or in the commun Please note how many I	nity (i.e. volunteer v nours a week and asketball-2 years-12	work) other than for how long you hrs/wk; church c	awards for skill or leadership at academic honors listed above. participate(d) in each activity. hoir-6 yrs-3 hrs/wk; offices held, or if necessary.		

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11.	rank in class, and SAT/ACT scores including the first semester grades of your senior year. Transcript should be sent to LMKII and MUST be postmarked by <u>May 15th</u> of the year in which the award will be made. I requested transcript on" (Date)							
	NOTE: PROVIDE a copy of the scores or a print out from the testing YOUR APPLICATION WILL BE	ng website will be acc	•	•				
12.	Give a brief description of your wo	Give a brief description of your work experience, part-time or full-time.						
	Employer	Position/ Type of Work	Dates (From-To)	HRS/WK	Income			
	Name and Phone Number of Most Recent Employer:							
13.	Scholarships are awarded to girls who have participated in a Little Miss Kickball League for a period of at least four years. List league, team(s), and years played:							
14. Give the names of three persons as references. Reference A must be connected Miss Kickball Board (either corporate, district or local). Reference B is a former of coach. Reference C can be a close family friend, co-worker, relative, etc. All recommendation must be sent to Little Miss Kickball Corporation and be posting 15th. (Letters may also be included with this application.) A. LMKII Board reference (Name, league, title, address):					urrent LMKII ree letters of			
	·		,					
	B. LMKII Coach reference (Nam	ne, league, address):						
	C. General reference (Name, tit	le, address):						
15.	"I have requested References A,	B, & C to write a lette	er of recommen	dation on:				
	Date (A):	or Letter enclos	sed					
	Date (B):							
	Date (C):							
16.		vords or less) on you evements, or past g	ır future goals. oals which you					
17.	Please write a short essay (250 you. Attach your essay to this ap	•		g in kickball h	as meant to			

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If you are self-supporting, complete the following information for the coming school year.							
Employer		Position/Type of Work				Income	
If you are supported by parents, guardians, or others, complete the following information for the coming school year.							
Relationship	Relationship Em		nployer		Title/	Title/Type of Wo	
Give the names, ages, and work status of brothers and sisters. If any are now in college, gives sources of their support.							
Nan	ne		Age	Title	Title/Type of Work		
Estimate your total cost of one year of college. \$ How will you pay for college?							
Source			% of Cost				
Parents							
Work							
Loans							
Scholarships							
Other (Explain:							
Please list any other information related to finances which you would like the judges to cor							
Please list any other info	rmation rel	ated to finan	ces whic	h you would lil	ke the judg	es to consi	
Please list any other info	ormation rel	ated to finan	ces whic	h you would lil	ke the judg	es to consi	
Please list any other info	ormation rel	ated to finan	ces whic	h you would lil	ke the judg	es to consi	
Please list any other info	ormation rel	ated to finan	ces whic	h you would lil	ke the judg	es to consi	
Please list any other info	ormation rel	ated to finan	ces whic	h you would lil	ke the judg	es to consi	
Please list any other info							

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This scholarship application must be **POSTMARKED BY APRIL 20th**.

All references letters and transcripts must be <u>POSTMARKED BY MAY</u> <u>15th</u>. Scholarship, reference letters and transcripts must be postmarked by the U.S. Postal Service and mailed to:

SCHOLARSHIPS COMMITTEE
LITTLE MISS KICKBALL INTERNATIONAL, INC.
P.O. BOX 8046
CORPUS CHRISTI, TEXAS 78468-8046

(HAND DELIVERIES WILL NOT BE ACCEPTED.)

COMPLETE CHECKLIST BEFORE MAILING

Application (All Areas Completed)
Official Transcript in Sealed Envelope or Sent by School**
Copy of SAT/ACT Scores (see #11 for details)**
Letter of Reference: Board Member
Letter of Reference: Coach
Letter of Reference: General
Attachment A – Essay: Future Goals
Attachment B – Essay: What Kickball Means to You

**APPLICATIONS WITHOUT A TRANSCRIPT OR COPY OF SAT/ACT SCORES WILL BE DISGARDED!

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