2021 Sandston Stingrays

Scholarship Application

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| Name: |
| Street Address:   | Phone: |
| City: | State: | Zip Code |
| Email: | Age: | Years on team: |
| Parent Name: |  |
| Parent Email: | Phone: |
| By signing this document (typed signatures accepted), we confirm the following: |
| 1. Applicant is a senior in high school.
2. Applicant plans to attend college.
3. Applicant is a registered member of Sandston Stingrays swim team.
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| Applicant’ Signature:(Typed signature acceptable) | Date: |
| Parent’s Signature:(Typed signature acceptable) | Date: |
| Name of 2 Individuals Submitting Recommendations:Coach:Person Outside Swimming: |

**Community Service:**  Please list community service activities in which you have been involved during your high school career.

**Clubs**: Please list the clubs in school or in the community in which you have been a member during your high school career.

Club/Group Years Involved

**Essay**:  Please respond to the following prompt in 600 words or less. (The essay may continue onto additional pages.)

**Prompt:** How has swimming with the Stingrays impacted you in your everyday life outside of swimming?  What have you learned from swimming?