



## Financial Aid Scholarship \$700.00

**Purpose:** To provide financial assistance to a developmental skater who exhibits significant talent and a strong desire but lacks the necessary funds to advance to the next level of training.

The Southern Eastern Great Lakes Skating Council (SEGL) is pleased to announce that the amount set aside has increased to \$700.00. Monies will be issued directly to the recipient's home club to credit the skater's account for club ice and developmental programs. The recipient is encouraged to participate in the following SEGL Invitational Competition; competition registration fee will be waived.

### **Application Procedure**

1. Parent/Legal Guardian must submit a copy of most recent tax returns and information on any extenuating circumstances.
2. Submit a copy of present training program and cost along with your coach's recommended training program and cost.
3. Include a letter of recommendation from your coach addressing such issues as skater's dedication, hard work, and dependability as well as confirming skater's potential ability. Please include parental/guardian commitment to support their skater and assure that they will arrive on time and fully prepared for training.
4. Skater must submit an essay expressing what skating means to them and how this scholarship would be helpful.
5. Include a letter of recommendation from skater's home club confirming skater's commitment.
6. Include the completed questionnaire, signed by parent/guardian, skater, and home club officer.
7. All applications must be submitted by December 1, 2016.

### **Criteria**

1. Applicant must be a current registered USFS member of a SEGL member club in good standing.
2. Applicant must show both need and worthiness of this award.



## Financial Aid Scholarship Application Form \$700.00

Date \_\_\_\_\_ USFSA # \_\_\_\_\_

Applicant's Name \_\_\_\_\_ DOB: \_\_\_\_\_

Permanent Address: \_\_\_\_\_  
Street

\_\_\_\_\_

City State Zip

Day Phone ( ) \_\_\_\_\_ Evening Phone ( ) \_\_\_\_\_

Cell Phone ( ) \_\_\_\_\_

Email: \_\_\_\_\_

School Name: \_\_\_\_\_

School Address: \_\_\_\_\_  
Street City State Zip

**Please list any SEGL Invitational Competitions and any qualifying competition you have skated in stating this year and level:**


**List club volunteer hours:**

Activity	Hours per month
Activity	Hours per month
Activity	Hours per month

**Highest test passed**

Moves in the Field: \_\_\_\_\_ Date Passed: \_\_\_\_\_ Freestyle: \_\_\_\_\_ Date Passed : \_\_\_\_\_  
 Dance: \_\_\_\_\_ Date Passed: \_\_\_\_\_ Pairs: \_\_\_\_\_ Date Passed: \_\_\_\_\_

**I attest that the activity, test, and competition information filled out by the applicant is accurate and true to the best of my knowledge.**

\_\_\_\_\_  
**Club officer's signature (President, Vice President, Secretary, or Treasurer) Date**

**Affirmation:** Under penalty of forfeiture of any funds that may be awarded under this scholarship, I certify that the information provided is complete and accurate to the best of my knowledge.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent or Legal Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please keep a copy and return the original to:  
Southern Eastern Great Lakes Council  
Sportsmanship Award  
Dr. Jennifer Thompson  
51 Wyn Oak  
Nashville, TN 37205  
Trpaxel81@aol.com**

**Financial Aid Scholarship deadline is December 1, 2016**