



SOCCER
NOVA SCOTIA

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**UNIVERSITY ENTRANCE
STUDENT AWARDS/SCHOLARSHIPS
APPLICATION**

DEADLINE: Friday, April 26, 2019

Soccer Nova Scotia

Student Awards/Scholarships Application 2019

Soccer Nova Scotia is pleased to offer university entrance student awards/scholarships to outstanding members of Soccer Nova Scotia. Recipients must commence post-secondary studies at a Canadian university or college in the same year the award is presented.

Soccer Nova Scotia Student Awards are non-renewable entrance scholarships. They are awarded in the name of the recipient in September upon proof of registration and payment at university/college.

Successful recipients must agree that a photograph of themselves can be used for promotional purposes and submit a short Thank You acceptance video.

Applicants must submit all the following requirements to the address below.

1. Completed Application;
2. High School Official Transcripts (Grade 11 and Grade 12 to January 2019);
3. Small, colour, headshot photo of yourself for publicity purposes.
4. Letter of Recommendation(s)

Incomplete submissions will not be considered.

Please mail or drop off the complete package to:
 Awards Committee, c/o Kate Wigglesworth
 Soccer NS Student Award Applications
 Soccer Nova Scotia
 210 Thomas Raddall Drive
 Halifax, NS, B3S 1K3

Soccer Nova Scotia is pleased to offer the following student awards for 2019:

Philip Boyle Scholarship – Open to <u>male players</u> who exhibit a high level of play, are academically inclined, display integrity and honour, sportsmanship, community involvement, a love of competing and a passion for the game of soccer.	\$2,000.00
Hartlen Family Scholarship – Open to <u>male players</u> with strong soccer skills, strong academics and a history of giving back through coaching and/or training of others.	\$2,000.00 \$500/year for 4 yrs
Stephenie Allt Memorial Scholarship - Open to <u>female players</u> exemplifying community service and the values of fairness and sportsmanship of this young, outstanding player and celebrating the activity she loved most.	\$2000.00 \$500/year for 4 yrs
Halifax King of Donair Scholarship - Open to <u>all members</u> in remembrance of the twenty years King of Donair was a senior soccer club; the wins, the losses, the laughs, the road trips, the friendships made and remembering those who are no longer with us ... Billy Patterson, Mourad Farid and Co-Founder Nick Garonis.	\$750.00
Dr. Irene Szuler Scholarship – Open to <u>female players</u> who demonstrate outstanding qualities of leadership and truly exemplify effort, excellence and commitment to the game of soccer. Experience with the National Team program is an asset.	\$750.00
Frank H. Bailey Memorial Scholarship - Open to <u>male players</u> in memory of long-time Soccer Nova Scotia President, Frank Bailey.	\$600.00
Robert Sayer Scholarship - Open to <u>female players</u> in honour of the first soccer inductee to the Nova Scotia Hall of Fame – Builder.	\$600.00
VanRoy Tobitt Memorial Scholarship - Open to <u>male referees</u> in memory of the first Nova Scotia-based referee to reach National level status.	\$750.00
Carol Shadbolt Scholarship - Open to <u>female referees</u> in honour of the first female soccer referee in Nova Scotia.	\$750.00

SOCCER NOVA SCOTIA

STUDENT AWARDS/SCHOLARSHIPS APPLICATION 2019

Applicants must answer all questions on the application form. Appendices, extra pages or material such as certificates or letter(s) of recommendation may accompany the application. The completed application must reach Soccer Nova Scotia **no later than 4:30 p.m. on Friday, April 26th, 2019**. **ALL APPLICANTS MUST BE SOCCER NOVA SCOTIA MEMBERS.**

PLEASE SELECT A MAXIMUM OF TWO OF THE FOLLOWING STUDENT AWARDS FOR WHICH YOU ARE APPLYING. PLEASE MARK WITH AN (X):

- | | | | |
|-------------------------------------|-----------------------|--------------------------------------|-----------------------|
| Philip Boyle Scholarship | <input type="radio"/> | Frank H. Bailey Memorial Scholarship | <input type="radio"/> |
| Hartlen Family Scholarship | <input type="radio"/> | Robert Sayer Scholarship | <input type="radio"/> |
| Stephenie Allt Memorial Scholarship | <input type="radio"/> | VanRoy Tobitt Memorial Scholarship | <input type="radio"/> |
| Halifax King of Donair Scholarship | <input type="radio"/> | Carol Shadbolt Scholarship | <input type="radio"/> |
| Dr. Irene Szuler Scholarship | <input type="radio"/> | | |

1. GENERAL INFORMATION

Name: _____

First
Middle
Last

Phone #: Home: _____ Cell: _____

Address: _____

Street # / P.O. Box
City/Town
Postal Code

Gender: Male Female SIN No. _____ Birth Date: _____ dd/mm/yr

Email Address: _____

2. EDUCATIONAL BACKGROUND

High School(s) Attended:

Year(s)	Grades	Name of School	Location	Diploma

Expected Date of Graduation: _____

Educational Plans for the next academic year. Please mark with an (X).

University

 Community College

 Other

Post-Secondary Institution you plan to attend: _____

Proposed program of study: _____

3. SOCCER PLAYING / OFFICIATING / COACHING BACKGROUND (Past 5 Years)

Year(s)	Category	Team (if player)	Club/ Association

List your soccer involvements, during the past five years (include awards, achievements, volunteer positions, etc.):

List any other sport involvement:

4. SCHOOL ACTIVITIES

List extracurricular activities, including committees, athletics, clubs, volunteering and/or positions held (attach list if necessary):

Awards, Recognition, additional Certifications (attach list if necessary):

Academic: _____

Athletic: _____

Certifications: _____

Other: _____

5. COMMUNITY SERVICE

Demonstrated service through active participation (non-school):

6. EMPLOYMENT BACKGROUND

Provide a chronological record of employment for the last 3 years:

7. FINANCIAL NEED

Student Awards/Scholarships are awarded based upon various criteria including academics, soccer involvement, school involvement, community/volunteer involvement, employment and financial need. Provide a brief paragraph describing the specific circumstances that motivate your request for financial need consideration:

CERTIFICATION

I hereby certify that the foregoing information is true and correct and can be verified upon request.

Signature of Applicant

Date

Signature of Parent/Guardian

Date

Printed Name of Parent/Guardian

Relationship

**Send completed application to:
Awards Committee, c/o Kate Wigglesworth
Soccer NS Student Awards / Scholarship Applications
Soccer Nova Scotia
210 Thomas Raddall Drive, Halifax, NS, B3K 1S3
Tel: 902-445-0265
Must be received no later than 4:30 pm on Friday, April 26, 2019**

Letter of Recommendation

To be filled out by an Employer, Guidance Counselor/Instructor, etc.

SECTION 1: Applicant Information

Name: _____ Student ID: _____

Address: _____

Phone: _____ e-mail: _____

SECTION 2: Recommendation

Organization: _____ Phone: _____

Name: _____ Title: _____

Address: _____

1. How long have you known the applicant? Years: _____ Months: _____

2. Relationship to the applicant: _____

3. Please give your personal appraisal of the applicant with respect to the following:

	Excellent	Good	Average	Needs Improvement
Attendance & Punctuality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooperation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Judgement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reliability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Work Ethic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attitude	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. Please comment on the ability and accomplishments exhibited by the applicant. In addition, please address why you are recommending them. (Please use an additional page if needed.)

Signature: _____ Date: _____

Send completed application to:
Awards Committee, c/o Kate Wigglesworth
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