Coach Kacie Memorial Scholarship Application

All graduating High School Seniors who are members of a South Lyon Swim Team are eligible to apply

FAFSA forms must be completed with information included prior to submitting this application

Submission Deadline is April 21, 2024

Coach Kacie Memorial Foundation

Scholarship Application

For South Lyon Swim Team seniors planning to attend A University, College, or Vocational Training School

APPLICANT INFORMATION		
Name		
Address		
City	State Zip	
Email	Phone	
How long have you lived at this address?	DOB	
College Planning to Attend		
* NEEDED TO IDENTIFY YOU AT THE SCHOOL OF YOUR CHOICE		
HIGH SCHOOL DATA		
Cumulative GPA (based on a 4.0 scale) Counselor Recommendation Transcrip		
Please comment on any items if you feel explanatio	n is needed:	
Community Service/Volunteer Activities:		
Other Activities:		
Other Activities: Work Experience: (You may attach a resume if preferred)		

FAMILY OR HOUSEHOLD INFORMATION						
Are you listed as an exemption on your parents Federa	al Tax Return?	□ Yes	□No			
The year issued as an exemption on year parents i each						
Name of Father/Guardian					-	
Name						
Address						
City	State		Zip			
Email		Phone _				
Occupation	_ Employer					
Name of Mother/Guardian						
NameAddress						
City						
Email						
Occupation						
Have you filed a FAFSA form? ☐ Yes ☐ No (if no, explain):						
Have you received a scholarship or grant? ☐ Yes ☐ No (if yes, list):						
Are you eligible for any other financial assistance? \square Y	res ⊔ No (if yes	, list):				
If you are eligible for a scholarship or other financial aid	d, please explai	n:				
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ESSAY On a separate page, please respond to the 3 questions below: Describe a time you impacted someone else's life. Describe your favorite swim team memory. Describe a dream you have for the future. Your narrative will be a significant part of your overall score, so you should give it considerable thought. All essays should be **DOUBLE SPACED**, **TYPED or PRINTED IN BLACK INK**. **APPLICATION CHECKLIST** Please make sure your application is complete. In support of this application, please include: ☐ Completed, signed scholarship application ☐ Essay narrative/or special attachment ☐ Copy of current/most recent school transcript ☐ Letter of recommendation from either a Teacher or Counselor ☐ Letter of recommendation from Swim Coach or Teammate **CERTIFICATION** I/We hereby affirm that the information provided on this form and the accompanying material is accurate and complete to the best of my/our knowledge. Falsification of information may result in termination of any scholarship granted. **Applicant Signature** Date Parent or Guardian Signature (if applicant is under 18) Date

MAIL COMPLETED APPLICATION TO:

Coach Kacie Memorial Scholarship 754 Kestrel Ct South Lyon, Michigan 48178