

# Greater Miami Valley Wrestling Association



## GMVWA SCHOLARSHIP APPLICATION

Name of applicant \_\_\_\_\_

Address \_\_\_\_\_

Telephone number \_\_\_\_\_

High School attended \_\_\_\_\_

Year of graduation \_\_\_\_\_ Rank in class # \_\_\_\_\_ out of \_\_\_\_\_

Grade point average \_\_\_\_\_

College you plan to attend \_\_\_\_\_

College you are currently attending \_\_\_\_\_

Credit Hours accumulated \_\_\_\_\_

Estimated date of graduation \_\_\_\_\_ Grade point average \_\_\_\_\_

Are you planning to or are you currently wrestling in college? \_\_\_\_\_

Estimated cost per year for your college education \_\_\_\_\_

Are you now receiving or will you receive any form of financial assistance for your college education? If so, list, excluding parental support.

Amount \_\_\_\_\_ Source \_\_\_\_\_

Amount \_\_\_\_\_ Source \_\_\_\_\_

Amount \_\_\_\_\_ Source \_\_\_\_\_

Parents' annual income \_\_\_\_\_ Number of dependents other than applicant \_\_\_\_\_

Son or daughter of an active GMVWA member. Yes No (circle one)

Length of time parent has been an active member \_\_\_\_\_ years

On a separate sheet please state in a short essay why you feel you should receive this scholarship. Include your past accomplishments and your future goals.

Please submit a current transcript and two letters of recommendation with this application.

This form must be submitted by a GMVWA member to receive consideration.