

Veribest Athletic Scholarship Application

Eligibility:

Applications are being accepted for Veribest High School Seniors who:

- Have an overall cumulative GPA of 80.0 or better.
- Plan to attend an accredited Vocational School, College, or University.
- Plan to enroll as a full-time student carrying at least twelve hours in the fall.

Application:

- The student and counselor or administrator must sign each application.
- A transcript must be attached.
- <u>Friday April 14th is the deadline for all applications</u>. This date will be strictly enforced. If the application is late, it **WILL NOT** be accepted.

Selection:

Selection is entirely merit based and the scholarship committee will consider:

- Academic achievement and goals.
- Participation in high school athletics.
- Recommendations from references (one reference must be a Veribest Coach). It is your job to make sure those arrive so that your application is complete.

Award:

- Final selection will be made by the Scholarship committee.
- The award is a one-time award of \$1000 that will be sent directly to the College or University. Athletic scholarships will be awarded to 3 eligible athletes.

Instructions for completing this application:

- Please take time to read the application over carefully before answering any of the questions.
- Complete all sections as thoroughly as possible; you may attach pages with additional comments as needed.
- You may print or type your responses. Please be clear and neat.
- The scholarship committee must have two references. All references must use the attached form and mail it to the address below. Family members may not serve as a reference.
- It is each student's sole responsibility to ensure that the complete application has been received. Incomplete applications will not be accepted.

All applications are to be mailed to:

Veribest Athletic Booster Club Attn: Scholarship Committee P.O. Box 594 Veribest, Texas 76886-0594

***OR HAND DELIVERED TO LEAH ZARUBA AT THE SCHOOL IN A SEALED ENVELOPE NO LATER THAN FRIDAY APRIL 14th ***

- Please check with your references to ensure they have mailed their reference letters to the address above. All applications should be postmarked by the due date. NO application or reference letter will be accepted after that date. DO NOT wait until the deadline date to start checking on the status of your application packet. If you would like to make sure the Booster Club has received the packet, please contact one of the Booster Club Officers.
 - o Sarena Salvato
 - Ricky Salvato
 - Heidi Williams
 - Mickey Scott
 - o Janie Whitaker / Billy Tucker

PERSONAL INFORMATION (TYPE OR PRIN	т)
Name:	Date:
SSN:	Date of Birth:
Home\Permanent Address:	
City, State< Zip Code	
Phone:	Second Phone:
(Parent or Guardian):	(Phone No.)
Academic Performance	
(Please list scores and GPA - You n	nust meet at least one of these)
SAT:	
ACT:	
GPA:	
Class Rank: Tot	al Number of Students:
Date of this application:	Signature of Principal or Counselor:

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NAME AND ADDRESS OF VOCATIONAL SCHOOL, COLLEGE, OR UNIVERSITY YOU PLAN TO ATTEND	MAJOR OR "UNDECIDED"

EXTRACURRICULAR ACTIVITIES:

(These should be school or school related activities. Community and work activities are in the next section of the application. This might include, but not limited to: sports, student government, FFA, FHA, Annual Staff, UIL, etc.)

Activity:	No. of Semesters:
Sponsor & Phone Number:	
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Sponsor & Phone Number:	
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Sponsor & Phone Number:	

ATHLETIC PARTICIPATION

(This would include events you participated in, years played, and awards you received. You may include any volunteer work you did, while in high school that is related to sports).

Primary Sport at VHS:	No. of Seasons:
Secondary Sport at VHS:	No. of Seasons:
Third Sport at VHS:	No. of Seasons:
Club Team Sport:	No. of Seasons:

LEADERSHIP / RECOGNITION

(As it relates to athletics - Includes Team Captain, All-District 1ST or 2ND team, MVP honors, and San Angelo Standard Times News honors or any other honors relevant). **Please list: (use additional page if needed)**

EDUCATION AND CAREER GOALS:

(Tell the Scholarship Committee why you should be awarded this scholarship. Explain how/why you chose the school you plan to attend. Include anything you think the Scholarship Committee should know about your skills and talents that has not already been mentioned).

Please list the name, address, and phone number of the 2 references you have requested to complete the evaluation form on your behalf. <u>It will be your sole</u> <u>responsibility to have this information into the Scholarship Committee by the</u> <u>April 14th deadline.</u> This section will only serve as a double check in matching the documents received.

Name	Address	Phone	Relationship to You	

I have provided all information requested and believe it to be true and correct. I understand that the \$1000 scholarship will be paid directly to the school of my choice and not to me.

Signature	of	App	licant
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Date



Veribest Athletic Scholarship Committee Confidential References Evaluation Form

Please Type or Print:

Name of Applicant	Name of Reference
Social Security Number	Title
Home Address	School, Firm, or Organization
City, State, Zip Code	Business Address
What is your relationship with the Applicant?	City, State, Zip Code
How many years have you known the Applicant?	Business Phone Number

The Scholarship Committee is interested in students who have the following traits. Please rate this student in comparison with other students their same age that you are, or have been, acquainted.

Rating Scale			
Ranks with the very best students (top 5%)	1	Above Average (top 40%)	4
Superior (top 10%)	2	Average (Middle 20%)	5
Outstanding (top 25%)	3	Below Average (Bottom 40%)	6
Inadequate opportunity to observe			Х

Enter the appropriate number based upon the qualities and rating scale (on the

previous page):

Academic Record Achievements	Ability in Interpersonal Relationships
Leadership	Poise and Self Confidence
Honesty and Integrity	Candor and Conviction
Moral Character	Analytical Ability
Extent of Participation	Writing Abilities
	Special Talents and Ability (Specify)

Please give a general evaluation and any comments you might have on this student's strengths, talents, abilities, and likely contribution to his or her school of choice. Please tell us anything you feel is relevant to this process. Please include examples when possible.

Signature of Reference

Date

THIS APPLICATION MUST BE POSTMARKED BY April 14th, 2023.

Please mail application promptly to:

Veribest Athletic Booster Club Attention: Scholarship Committee P.O. Box 594 Veribest, TX. 76886-0594



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