## Connecticut State USBC Association 2024 Scholar of the Year Award \$1000.00

## ELIGIBILITY REQUIREMENTS: (There is 1 academic scholarship available.)

- 1. Applicant shall be USBC member that holds a current youth membership in Connecticut
- 2. Applicant shall be entering an institution of higher learning in the summer or fall semester following graduation from a Connecticut High School.
- 3. All documentation MUST be postmarked by March 31, 2024
- 4. The top five overall candidates will be required to attend an interview.

## **OTHER REQUIREMENTS:**

- 1. The application packet must contain the following:
  - a) Scholarship application completely filled out.
  - b) Letter from applicant expressing interest in scholarship award(s).
  - c) All schools applied to and all acceptances received.
  - d) Organizations, clubs, sports, etc., in which you have participated at school.
  - e) Any awards or scholastic honors received during high school.
  - f) Organizations, clubs, sports, etc., in which you have participated outside of school.
  - g) Offices held in these organizations and any honors or awards received.
  - h) Hobbies and special interests.
  - i) Employment, if any.
  - j) Future goals and plans.
  - k) Additional information you consider pertinent.
  - 1) School Profile should be included with application.
  - m) At least one personal letter of recommendation must be submitted.

n) Official transcript of grades including FIRST SEMESTER grades.

| APPLICANT'S NAME                       |                           | AGESEX                    |
|--|---------------------------|---------------------------|
| ADDRESS                                | TOWN                      | ZIP PHONE                 |
| APPLICANT'S USBC SANCT                 | TION #                    | YEAR OF GRADUATION:       |
| HIGH SCHOOL                            |                           | PHONE                     |
| SCHOOL ADDRESS                         |                           |                           |
| APPLICANT'S RANK                       | NO. STUDENTS              | OVERALL AVG               |
| SCHOOL OFFICIAL'S NAM                  | 1E                        |                           |
| SCHOOL OFFICIAL'S SIGNATURE (Required) |                           | TITLE                     |
| * ALL DOCUMENTS MUST                   | BE POSTMARKED BY MARC     | H 31 <sup>st</sup> , 2024 |
| PLEASE RETURN COMPLET<br>BETH TURGEON  | TED APPLICATION AND FORMS | TO:                       |

BETH TURGEON 30 MEADOW STREET SEYMOUR, CT 06483