



YARMOUTH DENNIS SOCCER CLUB SCHOLARSHIP APPLICATION

Please submit your completed application by email to: president@ydsoccer.org.

Student Name:

What school do you go to on CAPE COD?

How many years of YD Soccer experience do you have?

Student Street Address:

Student City, State, Zip Code:

Phone number:

Date of birth:

Birthplace:

What is your intended major in college?

What are your career plans after college?

ESTIMATED COST

1st Choice College	2nd Choice College	3rd Choice College
Tuition:	Tuition:	Tuition:
Room/board:	Room/board:	Room/board:
Total Cost:	Total Cost:	Total Cost:

PERSONAL RECORD

Father's Name:	Mother's Name:
Father's Address:	Mother's Address:
Father's Occupation:	Mother's Occupation:
Employer:	Employer:
Father's Income:	Mother's Income:

Total number of persons dependent on parents (including parents and self):

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Number presently in college:

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Estimated Parental Contribution:

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Estimated Student Contribution:

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ESSAY: In the space below, state why you would be a good candidate to receive a scholarship. (Why should a group that has worked to raise scholarship funds choose you?) Are there any family/personal circumstances that a group should know about?