1. The Millersville Recreation Association Athletic Scholarship will be awarded to up to four (4) deserving recipients from Howards Grove High School who intend to further their education at a technical school, college or university.

2. The following criteria shall serve as a guideline for selection of the scholarship recipients:

a. Academics

b. Athletics

c. Community Service and Involvement

3. The application must be accompanied by a letter of recommendation from a non-relative coach.

4. The attached application detailing academic, athletic and community service achievements MUST be signed by both the guidance counselor and the athletic director. The completed application and letter of recommendation should be emailed to MillersvilleRecScholarship@gmail.com. The a**pplication DEADLINE is April** 30th**.**

5. The scholarship will be used for the first year of education following graduation from Howards Grove High School.

6. Final selection and awarding of the $1000 scholarships will be made by the Millersville Recreation Association Selection Committee and will be announced at Howards Grove High School’s Senior Scholarship Night.

7. It will be the responsibility of the recipients to notify the selection committee upon successful completion of their first semester. Please email a copy of your transcript with first semester grades, as well as your current mailing address to MillersvilleRecScholarship@gmail.com.

8. A check in the amount of $1000 shall be mailed to the recipient(s) upon successful completion of their first semester and receipt of a satisfactory transcript.

**Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Telephone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name of Parent/Guardian:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address (if different): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Intended School of Enrollment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Academics:** \_\_\_\_\_\_\_\_\_\_\_\_ Grade Point Average \_\_\_\_\_\_\_\_\_\_\_\_ ACT Composite

**Athletics:** (List all athletics participated in, along with the number of major letters and year letters were awarded.)

| **Sport** | **Year(s) of Participat**i**on** | Number **of Varsity Letters** | **Athletic Awards** |
| --- | --- | --- | --- |
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Verification of Guidance Counselor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Verification of Athletic Director\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Community Service & Involvement:** The Millersville Recreation Association is dedicated to enhancing the quality of youth athletics. Please explain how you have positively contributed towards youth athletics in the Howards Grove community.

Please explain how youth athletics have positively enhanced your educational experience in Howards Grove.

Please list any other community service activities or involvement.