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**Stacy and Diana Childs**

**Alpine Competitive Scholarship Application**

**OBJECTIVE:**

* To provide financial assistance to local alpine athletes involved in competitive alpine skiing. This scholarship is to be awarded to athletes who embrace hard work, exhibit a persistent and sustained high level of effort and dedication. These individuals will demonstrate the ability to proactively set goals, and to successfully implement a plan to achieve those goals.

**TIMING:**

**There are three application periods:**

**Winter Awards:**

* Applications must be submitted by January 1st. Awards announced by January 15th
* Applications must be submitted by February 15th. Awards announced by March 1st.

**Summer Awards:**

* Applications must be submitted by May 1st. Awards to be made on May 15th

Athletes may apply for each award period if desired.

**APPLICATION PROVISIONS:**

* **Items 1- 4 of the Scholarship Application must be prepared by applicant personally.**
* Age limits; 12 to 22 (as of application submission date).
* Be available for a personal interview with selection committee, if requested.
* Applicant must have strong SSWSC coach support.

**SUBMISSION OF DOCUMENTS:**

* Send application and supporting documents to:

SSSWSC

Stacy and Diana Childs Scholarship Committee

P.O.Box 774487

Steamboat Springs, CO 80477

* Direct questions to Sarah Floyd (879-0695 x104) or sfloyd@sswsc.org

**Stacy and Diana Childs Scholarship Application**

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Athlete’s Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth: \_\_\_\_\_\_\_\_\_ Current Age: Grade: School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Total number of years in SSWSC (including current season): \_\_\_\_\_\_\_\_\_\_\_

Program(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parents'/Guardians' Names: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Expected Competition/Camp and Travel Expenses:**

**ITEMS 1 – 4 ARE TO BE COMPLETED BY ATHLETE**

1. Please list each event you are seeking funds for and why each event is important toward reaching your athletic goals:

2. Are you receiving financial support from any other sources (besides parent(s)/guardian(s)) for the above listed events?

YES NO If YES, please state amount: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Did you participate in an SSWSC summer training camp during the summer of 2016?

YES NO

4. Please describe your athletic and educational goals. What separates you from other athletes? (Minimum 300 words. Use separate sheet.)

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **STEAMBOAT SPRINGS WINTER SPORTS CLUB** | | | | |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
| **FINANCIAL NEED SCHOLARSHIP APPLICATION - DATA SHEET** | | | | | |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
| **ASSETS** |  |  |  |  | **SOURCES OF INCOME** |  |  |  |  |
| Real Estate Owned: |  | Value |  |  | Employment/Wages |  |  |  |  |
|  |  |  |  |  | Mother |  |  |  |  |
|  |  |  |  |  | Father |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  | Unemployment/Social Security |  |  |  |  |
|  |  |  |  |  | Business Income |  |  |  |  |
| Vehicles Owned (Make,Model, Year) | | |  |  | Child Support |  |  |  |  |
|  |  |  |  |  | Pension/Retirement |  |  |  |  |
|  |  |  |  |  | Investment Income |  |  |  |  |
|  |  |  |  |  | Other |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
| Other Major Personal Property |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  | Total Income |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  | **EXPENSES** |  |  |  |  |
| Cash/Investments |  | Total $ |  |  | Monthly Expenses |  |  |  |  |
| Bank Accounts |  |  |  |  | Mortgage/Rent |  |  |  |  |
| Education Funds |  |  |  |  | Utilities |  |  |  |  |
| Investment Funds |  |  |  |  | Child Care |  |  |  |  |
| Retirement Funds |  |  |  |  | Other |  |  |  |  |
| Other: |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
| **LIABILITIES** |  | Owed |  |  | Annual Expenses |  |  |  |  |
| Mortgage(s) |  |  |  |  | Medical/Health Insurance |  |  |  |  |
| Vehicle Loans |  |  |  |  | Education |  |  |  |  |
| Credit Cards |  |  |  |  | Vacation/Travel (not including SSWSC) | |  |  |  |
| Education Loans |  |  |  |  | Other |  |  |  |  |
| Other: |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |

CONFIDENTIAL- FOR SCHOLARSHIP COMMITTEE

970-879-0695/FAX 970-879-7993

I hereby certify that all the above information is true, correct and complete. I acknowledge that failure to complete this entire application and/or submitting false information may disqualify my child from financial assistance.

PRINT Parent/Guardian Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PRINT Parent/Guardian Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SEND PARENTS' **COMBINED 2015 INCOME TAX FORM (including schedule C and K-1 form, if Applicable)** OR A COPY OF EACH PARENT'S **INDIVIDUAL 2015 INCOME TAX FORM (including schedule C and K-1 form, if applicable)** TO:

Steamboat Springs Winter Sports Club

Stacy and Diana Childs Scholarship Fund

P.O. Box 774487

Steamboat Springs, CO 80477