

# Vernon Little League Scholarship Application- 2019

Name:

Address:

Email Address

Phone Number:

GPA: \_\_\_\_\_ *(you may be asked submit a copy of your transcripts which have been certified and signed by your guidance counselor).*

How many years and what ages did you participate in Vernon Little League spring program and fallball program as a player and coach?

List any and all High School activities you have participated in. (This includes varsity sports, committees, NHS, etc.)

List any and all community activities you have participated in. (Including church, volunteer work and other youth sports coaching)

What college will you be attending?

Does this college have a baseball team and will you be playing?

If this college does not have a baseball team, does it have a school affiliated baseball program (ie: club team or intramural team) and will you be playing?

***Please provide a typed essay (12 font, approximately 500 words) on the following:***

*Describe the way(s) in which your experience of playing/participating in Vernon Little League has impacted you in your daily life.*

*By submitting this application I understand I am giving permission to Vernon Little League to publish my name, picture, and the college I plan on attending in any public relations materials, including newsprint and the Vernon Little League web site.*