2023/2024 MICHIGAN ASSOCIATION-USA BOXING INC. APPLICATION FOR BOXER'S COLLEGE SCHOLARSHIP

Personal Information

Last First Middle Initial Mailing Address Apt City State Zip Code Student ID # - Please attach Student Tuition Statement Applicant's Contact Phone # - Please attach Student Tuition Statement Applicant's Contact Phone # - Please attach Student Tuition Statement Applicant's Contact Phone # - Please attach Student Tuition Statement Applicant's Contact Phone # - Please attach Student Tuition Statement Applicant's Contact Phone # - Please attach Student Tuition Statement Phone & Address of learning facility to which the Scholarship check should be written.	Name		/		/	_
Street Address Apt City State Zip Code Student ID # - Please attach Student Tuition Statement Applicant's Contact Phone # - Please attach Student Tuition Statement Name & Address of learning facility to which the Scholarship check should be written.		Last		First		
Student ID #	Mailing Address	Street Address				_
Applicant's Contact Phone #	City		State		Zip Code	
Name & Address of learning facility to which the Scholarship check should be written. Phone # of School Financial Office Yearly Tuition / Tuition Balance / Payment Due Dates / The Scholarship should be applied to my Tuition Balance List any schools that you have attended	Student ID #		Please a	- Please attach Student Tuition Statement		
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The Scholarship should be applied to my Tuition Balance	Yearly Tuition	/ Tuition Balance	/ Paymer	nt Due Dates		
List any schools that you have attended		/	/			
	The Scholarship sho	ould be applied to m	y Tuition Balar	nce		
Name & City, AddressDates attendedCredits completed	List any schools that	t you have attended	l			
	Name & City, Add	ress	Da	Dates attended		Credits completed

Scholarship terms and conditions

Criteria for eligibility for scholarship:

- 1. The applicant is limited to (1) one Scholarship Grant from the MICHIGAN ASSOCIATION-USA BOXING INC. per school year.
- 2. The applicant must submit the application and all required documents by June 1, 2023 to Paul Watson at 6072 Briggs Lake, Brighton, MI 48116.
- 3. It is the goal of MICHIGAN ASSOCIATION-USA BOXING INC. to distribute two scholarships per school year in the amount of One Thousand (\$1,000.00) Dollars each.

- 4. The applicant must have "Competed Boxed" in (2) two boxing matches in the year prior to application for scholarship.
- 5. The applicant must be Registered with USA Boxing through a USA Boxing Club in the Michigan LBC and must be in "Good Standing" with USA Boxing. The applicant's passbook must be examined by the MICHIGAN ASSOCIATION-USA BOXING INC.
- 6. The applicant must provide a letter of recommendation from the applicant's coach.
- 7. If the applicant is applying for any other Grant or Financial Aid from any other source, only the tuition amount not covered by those Grants or Financial Aid is deemed eligible by the MICHIGAN ASSOCIATION-USA BOXING INC. program.
- 8. In the event that an Applicant does not finish the schooling period for which a Scholarship is awarded, the remaining monies from the Scholarship shall be returned to the MICHIGAN ASSOCIATION-USA BOXING INC.
- 9. The applicant must be attending classes in the semester for which a Scholarship is granted.
- 10. Any application for a Scholarship to a Trade School must be accompanied by a letter of acceptance to that State accredited trade school.
- 11. Any applicant misrepresenting any information on the application will be denied approval for the scholarship grant requested.

The Scholarship Committee retains the right to make exceptions of any of the above said criteria on a case-bycase basis. A written explanation on any exception for the above criteria is needed at the time of the scholarship application. Failure to do so may lead to denial of the Scholarship.

The information provided in the application is accurate. Any aid received will go towards academic use. I pledge myself to excellence in the classroom, community, and life.

I have read and understand the Terms and Conditions above and agree to be bound by them.

Applicants Signature & Student ID Number

Date

Personal goals:

How do you plan to use your degree/education? What are your goals?

What is the best way for you to complete this plan and reach your goals?

How do you think others will benefit? (Your impact on family, friends, community, etc)

What obstacles or challenges do you see being faced with?

How do you plan to deal with them?

If there is anything else that you would like to share about yourself, please submit it on a separate sheet and include it with your application.

Hobbies and activities

List the organizations and activities in which you have been involved with and the dates that you participated.

Employment

Employer

Type of Work

Dates