Juanita's Joy Foundation



## Xavier Smith Athletic Scholarship

2024 – 2025 School Year Scholarship Application

Date:					
Applicant Nam	e:				
Address:					
City:		State:	Zip:		
Phone Number:		Email:			
Age:					
Grade	Male	Female	-		
Expected Grad	uation Date:	Month	Year		
Carver H.S. affi	liated athletic	team:			
Wrestling O	Football O	Basketball O	Track O	Volleyball O	Baseball O
Softball O	Tennis O	Cross-Cou	ntry O	Bowling O	Golf O
activities:		interest, extra-			

2. Briefly state your educational or vocational goals upon graduation:						
Education:						
Which college will you be attending?						
·						
What would you like to major in?:						
Vocational:						
Will you be attending a vocational/trade program? YES or NOIf yes, which program do you have in mind?						
-Which institution will you be attending for certification?						
Where would you like to see yourself in five years?						
*Please email application to: <u>juanitasjoyfoundation@gmail.com</u>						
Student Signature Date:						
School Administration Signature: Date:						