

**Requirements:**

**OHSBCA Scholarship Application**

1. Applicant must be a son or daughter of a baseball coach.

2. Coach must be a member for the current year and the previous five years.

3. Enclose an **official transcript** of the applicant’s grades through the 7th semester.

**Procedure:**

Applicant and parents complete the application and sign for verification. Take the completed form to the

appropriate school official (counselor, principal, etc.) to be forwarded to the OHSBCA.

Categories and questions below refer to activities and honors **AFTER 8th grade**. You may attach additional sheets if necessary.

Name: School:

Home Address:

City: Date of Birth

Father Coaches at what School \_\_\_\_\_\_\_\_\_\_\_State: Date of Graduation:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Zip:

Father’s Name: Father’s Occupation: Mother’s Occupation:

No. of Siblings

Mother’s Name: Employer: Employer:

Ages of Siblings:

No. in college (including applicant) next year:

**Academic Information**: GPA (on a 4.0 scale):

Class Rank:

out of

**SAT or ACT Scores**: ACT Composite Score:

SAT–Verbal:

SAT-Math: SAT–Combined:

**Activates:** High School, community, music, sports, art, scouts, religious, etc. Complete year, positions held and if you plan to continue the activity in college.

Activity: Activity: Activity: Activity:

Years Participated: Years Participated: Years Participated: Years Participated:

Positions Held: Positions Held: Positions Held: Positions Held:

Name of Coach:

Applicant’s Signature:

District: NW NE C SW SE E

Print Name of Applicant:

Head Coach’s Home Address:

City:

State:

Zip:

Head Coach’s Home Phone Number:

This form and documentation must be received by **June 1, 2015**. Please return to the current president of the

OHSBCA.

**THIS FORM MUST BE PROPERELY AND COMPLETELY FILLED OUT WITH PROPER DOCUMENTATION FOR CONSIDERATION BY THE DEADLINE.**

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| **Send form and documentation to:**  You may also e-mail this form by clicking on the hyperlink and saving as an attachment | Kevin Yoder | (W) (740) 754-2921 |
|  | Tri-Valley High School | (C) (330) 204-1894 |
|  | 46 East Muskingum Ave | Fax (740) 754-6415 |
|  | Dresden, Oh 43821 | Email: kyoder@tvschools.org |