

# SCHOLARSHIP PROGRAM

(THIS APPLICATION MUST BE TYPED)

Name \_\_\_\_\_ Social Security No. \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
E-Mail Address \_\_\_\_\_  
Phone Number: Residence \_\_\_\_\_ School \_\_\_\_\_  
Birth Date \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_  
Parent(s) Name \_\_\_\_\_  
Name and Age of Brothers/Sisters \_\_\_\_\_  
\_\_\_\_\_

Applicant's Signature \_\_\_\_\_  
Date \_\_\_\_\_

**NEBRASKA SOFTBALL FOUNDATION (NSF)  
SCHOLARSHIP PROGRAM  
APPLICATION FORM**

**4103 Osborne Drive East  
Hastings, NE 68901  
(402) 462-7100**

---

The Nebraska Softball Scholarship Program was established to award scholarships to Nebraska ASA members who desire to continue their education. Funds are made available through contributions from fans, players, teams, umpires, tournament sponsors and the NSF. All contributions to the scholarship fund are put in a trust fund and only the earnings of the trust may be spent for scholarships.

If for any reason the original recipient can not accept the scholarship, it may be given to an alternate. The number and value of scholarships awarded each year will be determined by the NSF Scholarship Committee.

Application and letters of reference must be returned to the above address before December 1<sup>st</sup>. Only complete applications will be considered. If you have any questions regarding this application, please call (402) 462-7100. This form may be reproduced as needed.

The Scholarship Committee will meet and select the scholarship recipients by January 1<sup>st</sup>. Each applicant will be notified by letter the results of the committee's decisions.

**A. Application Criteria**

1. Scholarships must be used in a post secondary or 4-year institution.
2. Applicant must have been a member of the Nebraska ASA the past and/or current year as a player, team manager, umpire or Nebraska ASA official.
3. Must not have previously received a NSF Scholarship.
4. Minimum grade point average equivalent of 3.0.
5. Applicant must be at least a senior in high school.
6. Enrolled as a full-time student in a post secondary or 4-year institution.
7. It is the responsibility of the applicant to ascertain their own eligibility to receive such a scholarship according to the eligibility rules of the college or university they will be attending.
8. Signature of Applicant is mandatory.
9. An official transcript is mandatory.
10. Personal resumes welcome.
11. All sections must be complete.

**B. Scholarship Committee Responsibilities**

1. Review, prioritize, and approve applications.
2. Investigate applicant's affiliation with the Nebraska ASA.
3. Establish scholarship amount.

**C. Requesting Scholarship Payment**

1. Upon completion of a term of higher education, the applicant may request payment of the scholarship from the Nebraska Softball Foundation by providing proof of completion from the Office of the Registrar.
2. Payment request must be completed within 60 days after the first completed term.

---

**PERSONAL INFORMATION**

Family Size \_\_\_\_\_  
Number of Family Members In College (not including yourself) \_\_\_\_\_  
Hours Worked per Week (During Summer) \_\_\_\_\_ Hourly Wage \_\_\_\_\_  
Name of Employer \_\_\_\_\_ Job Title \_\_\_\_\_  
Hours Worked per Week (During School) \_\_\_\_\_ Hourly Wage \_\_\_\_\_  
Name of Employer \_\_\_\_\_ Job Title \_\_\_\_\_

---

**SCHOOL INFORMATION**

High School \_\_\_\_\_ Graduation Date \_\_\_\_\_  
Number in H. S. Class \_\_\_\_\_ Your Class Ranking \_\_\_\_\_ GPA \_\_\_\_\_  
Counselor Signature \_\_\_\_\_

**An official copy of your transcript must be attached.**

Institution Attending or Plan to Attend \_\_\_\_\_  
Anticipated Occupation upon Graduation \_\_\_\_\_  
Anticipated Graduation Date \_\_\_\_\_

**Please complete the following if you are currently enrolled in college.**

**An official copy of your most recent transcript must be attached.**

College GPA \_\_\_\_\_ Major Area of Study \_\_\_\_\_

---

**NEBRASKA ASA INFORMATION**

Name of your District JO Commissioner \_\_\_\_\_  
Years you have been associated with the Nebraska ASA \_\_\_\_\_  
Name of Nebraska ASA Softball Team \_\_\_\_\_  
Name of League your Softball Team Played In \_\_\_\_\_  
Team Manager's Name, Address and Phone Number \_\_\_\_\_

Have You Ever Received an NSF Scholarship \_\_\_\_\_ When \_\_\_\_\_

**NEBRASKA SOFTBALL FOUNDATION (NSF)  
SCHOLARSHIP PROGRAM  
APPLICATION FORM**

**4103 Osborne Drive East  
Hastings, NE 68901  
(402) 462-7100**

---

List Special Honors or Awards You Have Received \_\_\_\_\_

---

---

---

---

---

---

Other Scholarships You Have Received \_\_\_\_\_

---

---

List Major Activities, Experiences and Contributions in the Following Areas:

School \_\_\_\_\_

---

---

---

Softball \_\_\_\_\_

---

---

---

Community Involvement \_\_\_\_\_

---

---

---

Include three (3) typed reference letters relating to your experience in one or more of the following areas: Need, Scholastic Ability, Softball Activities, Personal Qualities, Community Activities, or Higher Education Potentials.

References should state their relationship to you.

Attach a separate piece of paper indicating the reasons why you feel you should be considered for a Nebraska Softball Foundation Scholarship.