

CAPROCK AMBUCS BASKETBALL SCHOLARSHIP APPLICATION

The mission of the American Business Clubs (AMBUCS) is to inspire people to conquer challenges related to mobility and independence through a nationwide network of volunteer chapters, working in partnership with physical, occupational and speech therapists; by providing AmTryke adaptive trykes, scholarships for therapists and many forms of community service. Proceeds of the Caprock Classic Basketball Tournament are donated back to our community through these avenues. Thank you for your recent participation in the tournament - you directly contribute to our mission and for that we are so thankful!

In appreciation for tournament participation, eight \$1,000 scholarships are specifically reserved for tournament players, managers and/or trainers. The scholarship will be provided and administered by the Scholarship Committee through the Caprock Chapter of AMBUCS.

Scholarships are awarded according to the eligibility criteria detailed below:

- I. The amount of the scholarship for any recipient will be a one-time payment of \$1000.
 - a. The scholarship will be paid directly to the school upon receipt of the recipient's registration to Caprock AMBUCS Scholarship Committee.
- II. Eligibility for the scholarship is based on the candidate's ability to meet all the following qualifications:
 - a. The candidate must have participated in the Caprock Classic Basketball Tournament as a player or as a manager/trainer.
 - b. The candidate must demonstrate, through the documentation listed below, superior characteristics of integrity, dependability, consideration of others, cooperation with fellow students, school administration, and the overall community.
 - i. Testimony to such attributes must be submitted in the form of:
 1. A letter of recommendation from the high school principal OR senior class counselor.
 2. Letters of recommendation from two teachers.
 - c. The graduating applicant must be a senior at any accredited public or private high school. As previously stated, participation in a previous year's tournament is a requirement for scholarship submission.
 - d. The recipient must be enrolled full time at an accredited institution of higher learning. Four-year universities, junior colleges, trade schools, and religious institutions of higher learning are acceptable.
 - e. The recipient must notify, the Scholarship Committee of the following as soon as possible:
 - i. That the recipient has either accepted or declined the scholarship.
 - ii. The university or college the recipient plans to attend.

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ID # _____ (assigned by committee chair)

Please PRINT or TYPE

Full Legal Name _____

Address _____

Cell Phone _____ High School _____

Parent/Guardian Cell _____ Parent/Guardian Email _____

Graduation Date _____ High School Grade Point Average _____ (minimum 2.75 overall)

Year(s) participated in Caprock Classic _____ Position (player, manager etc) _____

Students applying for the scholarship to be offered this year should include with this application:

- (1) The earlier described letters of recommendation
- (2) A separate document on which they have addressed the following:

A. Briefly describe your future plans concerning education and occupation. Emphasize how your future career choice will help others and/or benefit your community.

B. Include or list any honors or specialized academic courses and extracurricular interests or activities, which you feel, would be of value to the Scholarship Committee in evaluating your application.

C. List activities in which you participated during high school.

D. List Colleges/University's to which an application has been made, or College/University preference.

Applications will only be accepted via email. One attached pdf is preferred, but not required.

APPLICATION DEADLINE

All applications and accompanying documents must be submitted via email to the CAPROCK AMBUCS SCHOLARSHIP COMMITTEE at **caprockclassicscholarship@gmail.com no later than March 15.**

I/We acknowledge our understanding of the details and regulations governing the awarding of the scholarship. I/We also state that to the best of my/our knowledge the preceding information is true and correct and that any discrepancy could result in disqualification for the scholarship and could cause its awarding to be revoked. I/We grant permission to CAPROCK AMBUCS SCHOLARSHIP COMMITTEE to verify information with school, including GPA.

Applicant's signature: _____ Date: _____

Parents or Guardian signature: _____ Date: _____