



2018 Garden City Centennial Soccer Club Student Scholarship Application

*Application Deadline: Envelope must be postmarked by April 10, 2018
Mail application and supporting material to GCCSC, P.O. Box 358, Garden City, NY 11530*

Date: _____

Name: _____
 Last First Middle

Home Address: _____ Garden City, NY 11530

Phone: _____ Date of Birth: _____

Email Address: _____

Name of high school you are attending: _____

Name of your high school guidance counselor: _____

Name of parent or guardian: _____

Address (if different): _____ Phone (if different): _____





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On separate pages or on the template at the end of the application, please attach the following:

1. A list of activities you participated in, clearly marked under the headings:
 - Extracurricular school activities
 - Leadership roles
 - Community service
 - Non-GC Centennial Soccer activities/teams
 - Employment, etc.
2. An essay of 500 words or less that answers the following question:
 - Garden City Centennial Soccer strives to instill the importance of good sportsmanship in all of its programs. Based on your years of playing soccer, what have you learned about sportsmanship? Please use a specific example to explain your thoughts.
3. A recommendation:
 - **A recommendation is required from a coach in one of the Centennial programs or a soccer coach from your school system.** Please have the coach forward the recommendation in a separate envelope to: **Garden City Centennial Soccer Club, Scholarship Committee, P.O. Box 358, Garden City NY 11530**

Eligibility for the Scholarship requires that the applicant:

- Must have played at least 5 years in one of the GC Centennial Soccer Club programs including intramurals, travel, refereeing or volunteering for TOPSoccer
- Must be a high school senior residing in Garden City
- Must have at least an 80.0 grade point average at the time of application
- Must have applied to and will be attending an accredited university or college in the 2018-2019 school year
- Must have participated in an extracurricular activity or community service activity or employment

I certify that I meet all of the eligibility requirements of the Garden City Centennial Soccer Club's 2018 Student Scholarship Program. I also give permission to my high school to release my "Grade Point Average" to a representative of the Centennial Soccer Club if they request it.

Name of Applicant

Name of Parent or Guardian

Signature of Applicant

Signature of Parent or Guardian



**List the seasons in which you played soccer, referred or volunteered for
TOPSoccer in the Garden City Centennial Soccer Club**

Soccer Experience	Seasons Participated
Intramurals	
Travel Soccer	
Referee	
TOPSsoccer volunteer	
Trainer (please note paid or volunteer)	

Are you currently playing soccer?

Yes / No



Extracurricular School Activities

Activity	Years/Grade	Hours	Position/Responsibility

Leadership Roles

Team/Club	Years/Grade	Hours	Position/Responsibility

Community Service Involvement

Activity	Years/Grade	Hours	Position/Responsibility



Non GC Centennial Soccer Activities/Teams

Activity/Team	Years/Grade	Hours	Position/Responsibility

Employment / Other

Job	Years/Grade	Hours	Position/Responsibility

