

## **Tuesday Night Athletic Foundation's Athletic Scholarship Application**

**Instructions:** This form and all accompanying materials are to be completed by the amateur athlete applying for a TNAF scholarship. Please mail this form and all accompanying materials to : **Tuesday Night Athletic Foundation, PO Box 251, Newport, RI, 02840.**

### **Scholarship Request:**

Scholarship Amount Requested: \_\_\_\_\_

Exactly what would the awarded funds be applied to: \_\_\_\_\_

### **General & Contact Information:**

Name: \_\_\_\_\_

Birth Date: \_\_\_\_\_

Address: \_\_\_\_\_

Address Apt. #

\_\_\_\_\_

City State Zip

Preferred Phone Number: (\_\_\_\_) \_\_\_\_\_

Preferred Email: \_\_\_\_\_

Parent/Guardian Contact: \_\_\_\_\_

Relationship to you: \_\_\_\_\_

Address: \_\_\_\_\_

Address Apt. #

\_\_\_\_\_

City State Zip

Preferred Phone Number: (\_\_\_\_) \_\_\_\_\_

Preferred Email: \_\_\_\_\_

**Athletic Information:**

Primary Sport: \_\_\_\_\_

TNAF will only consider scholarship awards based on applicant's primary sport. Please list only the sport for which you are seeking a scholarship.

Primary Sport Team: \_\_\_\_\_

Have you suffered at any time injury or illness that has kept you from training and competing for longer than six months? If yes, please state the nature and date of the injury or illness. \_\_\_\_\_

\_\_\_\_\_

Have you received any formal disciplinary action in the past six months by any athletic team or organization? If yes, please describe the circumstances surrounding the incident. \_\_\_\_\_

\_\_\_\_\_

**Academic Information:**

Are you currently enrolled in school? \_\_\_\_\_

School Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address Apt. #

\_\_\_\_\_

City State Zip

Grade: \_\_\_\_\_

G.P.A.: \_\_\_\_\_

If your school does not provide you with a grade point average, please include with your application your latest report card/progress report.

Please list any academic honors you have received in the past three years: \_\_\_\_\_

\_\_\_\_\_

Please list all activities and clubs, including sports programs that you participate in at this school: \_

\_\_\_\_\_



## **Tuesday Night Athletic Foundation's Athletic Scholarship Application Reference Form**

**Sports Reference:** This form and accompanying reference letter is to be completed by a coach that has known the applying athlete for at least one year. Please include this form with the reference letter you provide.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address Apt. #

\_\_\_\_\_

City State Zip

Scholarship Applicant: \_\_\_\_\_

Your Affiliation with Applicant: \_\_\_\_\_

Current coaching position: \_\_\_\_\_

On a separate piece of paper, please state how you know the applicant and why you feel that this applicant is a deserving recipient of an athletic scholarship. Please address the athlete's athletic abilities as well as character, sportsmanship, drive, work ethic, and citizenship. Please give specific examples when possible.

Please mail this form and the accompanying reference letter to:

**Tuesday Night Athletic Foundation, PO Box 251, Newport, RI, 02840.**

All information that you provide will remain confidential to TNAF's Board of Directors. Your reference letter will not be made available to the applying athlete.

## **Tuesday Night Athletic Foundation's Athletic Scholarship Application Reference Form**

**General Reference:** This form and accompanying reference letter is to be completed by someone who that has known the applying athlete for at least two years and who is not related to the athlete. Please include this form with the reference letter you provide.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address Apt. #

\_\_\_\_\_

City State Zip

Scholarship Applicant: \_\_\_\_\_

Your Affiliation with Applicant: \_\_\_\_\_

On a separate piece of paper, please state how you know the applicant and why you feel that this applicant is a deserving recipient of an athletic scholarship. Please address the athlete's character, sportsmanship, drive, work ethic, and citizenship. Please give specific examples when possible.

Please mail this form and the accompanying reference letter to:

**Tuesday Night Athletic Foundation, PO Box 251, Newport, RI, 02840.**

All information that you provide will remain confidential to TNAF's Board of Directors. Your reference letter will not be made available to the applying athlete.