

# MICHAEL CARTER SCHOLARSHIP APPLICATION

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

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

Phone Number: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Mother's Name: \_\_\_\_\_

Names and Ages of Siblings: \_\_\_\_\_

College or School Attending in the Fall: \_\_\_\_\_

Expected Course of Study: \_\_\_\_\_

High School GPA (as of mid-year): \_\_\_\_\_

On an attached page, list all school and community activities, employment and other activities participated in during your high school years. Emphasis should be on the Avondale Soccer Program activities in which you have been involved.

Why do you think you would be a worthy recipient of this scholarship? *You may attach additional pages.*

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Other factors you would like the award committee to know about your (financial need, family circumstances, etc.) *You may attach additional pages.*

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Signature

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Date