

Success Beyond the Classroom (SBC) SWCSD Scholarship Application 2017-2018 School Year

Application Deadlines:
(Marching Band) **May 19, 2017**
(Fall) **July 28, 2017**
(Winter) **November 3, 2017**
(Spring) **March 9, 2018**

IMPORTANT INFORMATION

Completed SBC applications must be **delivered** to the athletic director (HS) **or** the assistant principal (MS) **by 3:30 p.m. on or before the deadline date.** The deadline dates for each season are listed above.

SBC applications received **AFTER** the deadline date & time will **NOT** be considered for a scholarship.

Complete both sides. Do not leave any information blank.

SECTION ONE: PARENT/GUARDIAN ONLY

Student Name _____

School _____ Which Sport or Marching Band? _____

Name(s) of Parent(s)/Guardian(s) _____

Street Address _____

City, State, Zip _____

Home Phone # _____ Cell Phone # _____

1. **Father/guardian's employment status?** (Circle One): Full Time Part Time Not Currently Employed

Name of employer: _____

Mother/guardian's employment status? (Circle One): Full Time Part Time Not Currently Employed

Name of employer: _____

2. **Does your student qualify for** (Circle One): Free Lunch Reduced Lunch No Assistance

3. **Family/household size including parents and guardians:** _____

4. **During the last school year, how many students in your family/household participated in SWCSD middle school and/or high school extra-curricular activities?** _____

5. **Please explain any special circumstances or additional information that SBC should consider when reviewing your scholarship application, include circumstances such as family illness, extraordinary medical expense, job loss, disability, etc. (Do not leave blank.)**

**Turn over to continue application
Do not leave any information blank**

Revised:
12/21/17

SECTION TWO: STUDENT ONLY

6. Please list all school-related activities in which you participated during the past twelve months.

7. How does your participation in sports and/or marching band help you to grow as a student?

(Attach additional sheet, if necessary)

8. Why do you feel you deserve a Success Beyond the Classroom Scholarship?

(Attach additional sheet, if necessary.)

IMPORTANT

Before submitting this application, please review it carefully to verify all questions and information have been completed. **Don't forget to sign below.** SBC Scholarships are awarded based on the information you provide on this application. **If any information is left blank, the application will NOT be considered for a scholarship.** Results are determined by SBC then released to the schools approximately one week after the application deadline.

Please accept the information provided above for consideration of a SBC scholarship.

Student Signature: _____ **Date:** _____

Parent/Guardian Signature: _____ **Date:** _____

Attention athletic directors (HS) and assistant principals (MS) All SBC applications turned in to you must be delivered to the DSC by 4:30 p.m. on the deadline dates. Applications should be placed in an envelope marked "SBC" and given to the receptionist at DSC.

SBC is a 501(c)(3) organization dedicated to assisting students of SWCSD with scholarships to cover a portion of the pay-to-participate fee. SBC holds a fundraiser each year to raise money for these scholarships. If you would like to volunteer at any of the upcoming SBC fundraisers, please contact SBC or notify the athletic director (HS) or the assistant principal (MS) at your school.