

South Jersey Girls Softball Association

June 17, 2011

To: Coaches of S.J.G.S.A. Senior League Teams

From: S.J.G.S.A. Scholarship Committee

Attached to this letter is an application blank for your recommendation(s) for the awarding of an S.J.G.S.A. Scholarship to one or more of your current graduating players. The Criteria for this Scholarship award are: (1) the player must have played at least three (3) seasons in S.J.G.S.A., (2) must be a graduating high school senior and (3) must be attending a college, university or a technical school. You will be allowed to submit a maximum of three (3) applications per team. Please make a copy of the application blank if you have more than one (1) submittal. **A Personal Letter of recommendation from you must accompany each application.**

All applications should be returned to me at the above address no later than July 5, 2011.

If you have any questions regarding this request, please don't hesitate to call me. I am also requesting that you call me to let me know that you received this letter. The Committee does not want any player to miss this opportunity.

George Love,
S.J.G.S.A. Scholarship Committee
(856) 428-4683

APPLICATION FOR SJGSA SCHOLARSHIP AWARD
(PLEASE PRINT ALL INFORMATION)

PLAYER'S NAME: _____

TEAM'S NAME: _____

COLLEGE, UNIVERSITY OR TECHNICAL SCHOOL TO WHICH PLAYER
HAS BEEN ACCEPTED AND WILL ATTEND:

LIST ALL OTHER OUTSIDE ACTIVITIES PLAYER HAS PARTICIPATED
IN INCLUDING NATIONAL HONOR SOCIETY, ETC.

SEASONS PLAYED IN SJGSA AND TEAM NAMES (MINIMUM OF THREE
SEASONS):

SEASON

TEAM

_____	_____
_____	_____
_____	_____
_____	_____

COACH'S SIGNATURE: _____

PLAYER'S SIGNATURE: _____