Mike and Louise Adray ACHL Scholarship Award Application Packet

The Adray – ACHL Scholarship award is a one year scholarship open to any first year student enrolling in a Michigan College, University, Jr. College, Business School or Certified Training School. To be eligible the player has to have participated as at least a **second year Peewee, or played at Bantam**, **JV or Girls** level on an Adray Community Hockey League team. The applicant should show academic success in high school. Financial need will be considered in the selection process. Financial Aid Forms (FAF or FFS) should be on file at the college of your choice.

The award is not to exceed tuition for your freshman year. The award is presented to the student's college in their name to be applied to their account. Multiple Scholarships will be awarded if financially possible.

The applicant should fill out the appropriate sections of the Application form and return to their High School Counselor to be completed and forwarded to the Chairman of the Scholarship Committee. The application must be postmarked by May 31. A recommendation MUST be filled out by the applicants local Adray Community Hockey League Delegate and forwarded directly to the selection committee.

If you have any questions, please feel free to contact me:

email-<u>nancyjoe@netonecom.net</u>

Return Application To:

Joe Spedowski Chairperson Scholarship Committee 23400 13 Mile Rd Big Rapids, MI 49307

ACHL Scholarship Application

			Applican	t Information		
l Name:				Date:		
	Last		First		М.І.	
dress:						
	Street Address	5				Apartment/Unit #
	City				State	ZIP Code
one:				Email		
				is necessary)		
1. V	Vhat servio	e contributior	n(s) have y	ou made to you	local hoc	key program?
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			y experience	ce, i.e., position,	accomplis	shments,
а	wards, etc					
			OCKEY			
2 1	iat vaur na	rtigination on		ma an tha fallow	ing table a	terting with your
		t participation on			ing table s	starting with your
		, participation	and geing			
Tear	n	Division	Year	Associatio	n	Coach
		<u> </u>				

4. Discuss your future educational plans and goals in life.

ACHL Scholarship Application

Family Size:	No. Attending College.:	High School:	
Intended College:			
Intended Degree:			
Father's Name:			
Occupation:			
Mother's Name:			
Occupation:			

Describe your plans for financing your college education. Provide the Committee with an itemized list of your projected financial needs for this school year. List any scholarship(s) you have applied for or received and the amount.

Costs:

Tuition: \$	Room and Board: \$	Books: \$
Misc. Costs: \$	for:	
Scholarships:		
Source:	Amount: \$	
Source:	HOCKEY LEAGUE Amount: \$	Funded? Amount: \$
Source:	Amount: \$	Funded? Amount: \$
Source:	Amount: \$	Funded? Amount: \$
Other sources of suppor	t itemize with amounts:	
Source:		_Amount: \$
Source:		Amount: \$
Source:		Amount: \$
Source:		Amount: \$
Peturn this form to your a	school counselor to complete the recomme	andation and cond a transprint togethe

Return this form to your school counselor to complete the recommendation and send a transcript together with your ACT or SAT results to the Scholarship Committee.

Counselor's Recommendation (on High School Letterhead with contact phone number please)

Mike and Louise Adray Adray Community Hockey League Scholarship **Delegate/Association Recommendation**

Applicant: Have a member(s) of your local hockey association who knows you best complete this recommendation form. Have the ACHL Delegate countersign the form if he/she did not write the recommendation and forward the form directly to the Scholarship Committee chairman No Later than May 31.

Recommender: Please include in your recommendation the applicant's involvement in and contribution(s) to your local hockey program and any other comments or information which you feel might help the applicant.

Recommendation for:						
			-14/			
		COMMUNIC				
Recomm	ended By:_	HOCKEY LEAG				
ACHL De	elegate					
Full Name:			C	Date:		
	Last	First	М.І.			
Address:						
	Street Address			Apartment/Unit #		
	City		State	ZIP Code		
Phone:		Email				
		Return Recommendat	tion to:			
		Joe Spedowski				

ACHL Scholarship Committee

23400 13 Mile Rd Big Rapids, MI 49307