

ACCESS TENNIS

HAWAII JUNIOR TENNIS FOUNDATION

Development Scholarship Program

PURPOSE

To provide financial assistance to enable participation in national or interisland junior tennis competitions. The Scholarship amount is up to \$1000 and must be used for expenses related to these competitions.

ELIGIBILITY

To qualify, applicants must:

- ☐ Be a current Hawaii Pacific Section resident.
- ☐ Be age 18 or younger.

REQUIRED DOCUMENTS

- ☐ A completed scholarship application form signed by a parent or guardian.
- ☐ A proof of financial need.
- ☐ Acceptable documents include:
 - W-2 Form
 - Federal Tax Return
- ☐ Letter of recommendation from the applicant's tennis coach.
- ☐ Letter of recommendation from a teacher or counselor.

SCHOLARSHIP SELECTION CRITERIA

1. Financial need
2. Sportsmanship on and off the court
3. Tennis involvement, past success, and potential
4. Academic achievement
5. Community involvement

APPLICATION PROCESS

1. Complete the Junior Tennis Scholarship Application Form, which must be signed by a parent/guardian.
2. Mail the form and ALL required documents to:

Access Tennis: Hawaii Junior Tennis Foundation
Attn: Richard Ing
841 Bishop Street #860
Honolulu, HI 96813

3. Deadline - All applications must be received by May 1, 2019.

IMPORTANT: Please read all directions and print clearly. Failure to follow these directions may prevent an application from being reviewed by the Scholarship Committee. The Scholarship recipients will be notified via email.

RECIPIENT'S RESPONSIBILITY

All scholarship recipients are:

- ☐ Required to attend and complete the programs/events for which the scholarship is awarded. Failure to meet this requirement will result in the loss of scholarship.
- ☐ Required to submit receipts of travel expenses for the national or interisland tennis competition.
- ☐ Required to submit one-page summary of how the scholarship money benefitted the recipient.
- ☐ Expected to, if asked, participate in volunteer activities to help promote tennis.

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Development Scholarship Application

CONFIDENTIAL (To be completed by parents if under 18)

Please type in the form fields and then print and sign your completed application. Note that all personal financial information provided is used solely by the scholarship review team and kept strictly confidential.

Applicant Name:		
Age:	Birthdate:	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
Street Address:		
City:	State:	Zip:
Phone:	Email:	
Father's Name:	Mother's Name:	
Present Employer:	Present Employer:	
Occupation:	Occupation:	
Phone:	Phone:	
Total Household Income: (Adjusted Gross Income from line 32 of most recent tax return):		
Total Number of Persons in Household:		
Does the applicant currently have a part-time job? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain.		
If awarded, how would these funds be used?		
Total Anticipated Tennis Expenses for the year: Please attach an itemized list of anticipated expenses. Total expenses should be equal to or greater than scholarship request.		
Do you presently receive financial assistance for tennis from any other source? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain.		

Have you applied for any other tennis scholarships or funding within the last 12 months? If yes, please describe:

In 250 words or less, please tell us why tennis is important to you. (Must be completed by the applicant).

Grade Point Average:

School Name:

Community Involvement/Volunteer Work:

Honors/Achievements:

AUTHORIZATION/SIGNATURE:

By signing below, we certify that all of the information provided within this application is true and complete.

Applicant's Signature _____ Print Name _____ Date _____

Parent's/Guardian's Signature _____ Print Name _____ Date _____