OVAC FOUNDATIONS BASEBALL; BASEBALL SCHOLARSHIP

- 1. The recipient of this scholarship shall have partcipated in baseball for at least (2) two years from their freshman through senior seasons. Special consideration will be given to those applicants who partipated in the FOUNDA-TIONS BASEBALL CATCHERS CLINIC on January 24, 2021. There will be one (1) scholarship awarded to one baseball player.
- 2. The amount of the scholarship shall be \$500.00. This scholarship is for one year only.
- 3. A check will be made out to the winner and presented at the OVAC Banquet of Champions, May 10, 2021.
- 4. Candidates for this scholarship must be a senior, must have at least a 2.5 GPA, and participated in OVAC baseball for all four (4) years during the applicant's freshman through senior years.
- 5. Should there be no applicants who meet the criteria, without further deliberation, the selection committee will adjourn, awarding no scholarship that year.
- 6. The final date for receiving scholarship applications shall be **MARCH 15, 2021**.
- 7. Each school is permitted **ONE (1) applicant.** The applicant must have participated in OVAC baseball all (4) four years.
- 8. In case the winner becomes ineligible or refuses this award, an alternate will be selected by the committee.
- 9. The final decision on the awarding of the scholarship shall be made by Foundations Baseball management.
 - 10. Mail this completed application directly to:

DIRK DeCOY,
OVAC Executive Director
62771 Keystone Dr.
Bellaire, OH 43906

This information will be kept confidential and will be destroyed after use.

FULL NAME:		
SCHOOL:		
HOME ADDRESS:		
CITY:		
STATE:		
ZIP:		
PHONE NUMBER:		
(
COLLEGE ATTENDING (If applicable):		
MAJOR:		
FOR COMMITTEE USE ONLY		

Leadership/Activities	
Financial	
Academics	
Athletics	

TOTAL

FATHER'S NAME:	FINANCIAL	
	1. What is the ENTIRE family's yearly gross income based on last year's W-2 form?	
OCCUPATION:	\$	
MOTHER'S NAME:	2. Number of children in family;	
OCCUPATION:	Number of children living at home (including yourself);	
	Siblings attending college (current year)	
	ACADEMICS	
LEADERSHIP & ACTIVITIES	Grade Point Average (on an unweighted 4.0 scale. If you use otherwise, con-	
Please check the following activities that you have been involved with over your past four years in high school:	vert it to a 4.0 scale before submitting.)	
	Class Rank: out of	
Class officer	ACT Composite Score	
National Honor Society	SAT Composite Score	
NHS officer	Student's Signature:	
Student Council/Government		
SC officer	Coach's Signature:	
Boys' State/Girls' State		
(Delegate only; not alternate)	Guidance Counselor's Signature:	
National Merit Qualifier		
JETS	Principal's Signature:	
Only the above activities are considered. PLEASE DO NOT ADD any others.	Principal's Signature:	

ATHLETICS

LIST/CIRCLE YEARS YOU **COMPETED** IN FRESHMAN/VARSITY SPORTS:

(you would have received a certificate for this). Sport: _____ Please check all which apply: 9 10 11 12 Baseball Sport: Basketball 9 10 11 12 Bowling Sport: **Cross Country** 10 11 12 9 Football Sport: Golf 10 11 12 9 Soccer LIST/CIRCLE YEARS YOU **LETTERED** IN Softball **VARSITY SPORTS:** Swimming Sport: _____ Tennis 9 10 11 12 Track Sport: Volleyball 11 9 10 12 Wrestling Sport: 9 10 11 12 Have you ever won **CHAMPIONSHIP** honors in any of the following (individual or as a relay team Sport: member). 9 10 11 12 Please check all which apply: Baseball Did you participate in the FOUNDATIONS BASE-BALL CLINIC on January 24, 2021? Wrestling Track Yes No Basketball Foundations - 3 Football

OVAC ATHLETIC HONORS

Have you ever received ALL-CONFERENCE

FIRST TEAM honors in any of the following

STUDENT ESSAYS

PLEASE ANSWER THE FOLLOWING QUESTION IN 150-250 WORDS. **ESSAY MUST BE TYPED TO BE CONSIDERED.** You may use additional paper if needed.

1. How has playing the sport of baseball impacted your life?