

## The Bob Swanson Memorial Scholarships

The Bob Swanson Memorial Scholarships were established to commemorate the memory of a devoted husband, dedicated business man, great friend, worthy competitor, team player, consummate sportsman, and true champion of the game of tennis, who lost his courageous battle against cancer in June 1999 at age 46.

The Bob Swanson Memorial Scholarships will provide college scholarship grants to high school seniors actively participating in competitive tennis in the Northern Michigan District of the United States Tennis Association/Midwest Section. The goal is to reward young tennis enthusiasts with funding to advance their education. Each year two or more scholarships will be awarded to qualifying applicants.

A selection committee appointed by the board of The Bob Swanson Memorial Scholarship Fund, Inc. will determine the scholarship recipients. Selection will be made without regard to the applicant's race, color, ethnic origin, religious belief or physical handicap.

### **Requirements**

To be considered for a scholarship, each applicant must:

- be a permanent resident within the geographic boundaries of the Northern Michigan District of the USTA/Midwest Section.
- be actively participating in competitive tennis while in high school.  
(Applicants are not required to play USTA tennis nor are they required to play collegiate tennis. Scholarship selection is not based on one's level of tennis achieved but on what kind of student/athlete/individual they are.)
- submit a **completed** application packet with all requirements fulfilled.

### **Application Deadline:**

All completed applications must be **postmarked by Friday, January 8, 2016.**

**Any exceptions must be approved by the selection committee.**

## **The Bob Swanson Memorial Scholarship Fund, Inc.**

Dear Applicant,

Thank you for your interest in The Bob Swanson Memorial Scholarships. In addition to the general information requested on the application, the selection committee will also require affirmation through letters of recommendation from coaches, teachers, and others that the applicant embodies the character and qualities that distinguished Bob throughout his tennis life: dedication to the sport, a willingness to work hard to improve, respect for teammates and opponents, a strong sense of fair play and sportsmanship plus a leadership style that engendered team spirit and unity.

- **Please include three (3) letters of recommendation.**  
**(One letter must be from a USPTA or PTR professional - or your high school coach).**
- **On a separate piece of paper, please tell us how your involvement in tennis has impacted your life and also explain what a college education means to you.**

To be considered for the academic year 2016-17, all information must be postmarked by **Friday, January 8, 2016.** Please direct any questions to: Lynn Swanson at 906.458.8686 / lswandog@aol.com

Send your completed application packet to:

Lynn Swanson  
The Bob Scholarship Fund  
8847 E. Angus Rd.  
Traverse City, MI 49684-8411

# The Bob Swanson Memorial Scholarships Application

(Please type or print)

## Personal Information

Applicant \_\_\_\_\_ Social Sec. # \_\_\_\_\_

Address \_\_\_\_\_  
(Street) (City) (State) (Zip)

Telephone Number (\_\_\_\_) \_\_\_\_\_ Date of Birth \_\_\_\_\_

E-mail Address: \_\_\_\_\_

## Educational Background

High School \_\_\_\_\_ Telephone #: (\_\_\_\_) \_\_\_\_\_

Graduation Date \_\_\_\_\_ Cumulative Grade Point Average \_\_\_\_\_  
(Based on 4.00 = A)

List any scholarships, honors, awards received while in high school:

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List extracurricular activities in which you have participated:

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Have you applied for admission to and do you plan to enroll for fall semester/term 2016 at an accredited college or university? Yes \_\_\_\_\_ No \_\_\_\_\_

Name of Institution: \_\_\_\_\_

### **Financial Information**

Estimated costs for academic year (tuition, room/board, fees, books)  
\$ \_\_\_\_\_

Have you applied for Financial Aid? Yes \_\_\_\_\_ No \_\_\_\_\_

Planned Family contribution:

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### **Tennis Background**

Playing Profile (List rankings, team participation, individual accomplishments, etc.):

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Tennis Related Experience:

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Number of years played: \_\_\_\_\_

**I declare that the information reported on this form, to the best of  
my knowledge, is true, correct and complete.**

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_