# Delaware Junior Golf Scholarship Fund, Inc.

35759 Cutter Court Lewes, DE 19958

#### Please send to:

DSGA Scholarship Fund, Inc. 35759 Cutter Court Lewes, DE 19958 Applications must be received by May 1st

Name:					
FIRST		MI	LAST		
Email:	<del></del>				
Address:					
City:					
Tel: ()	Date of l	Birth: /_	/	-	
Names of Parents:					
Address:					
High School Attena					
College Choice:			Apply	0,	
Year you will enrol You must be a high sch	l in college: ool senior or a college s		_ d a resident of	(FR, SO,	
Current GPA:	Cl	ass Rank: _			
SAT Score:	<i>M</i> :	R:		W:	
Signature:				_ Date:	

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### **Applicant Requirements**

All applicants must meet one of the below criteria to be considered for an award.

- 1. The applicant must reside in the state of Delaware
- 2. The applicant must attend a high school located within the state of Delaware
- 3. The applicant must be affiliated with a private or public country club, golf club or golf course within the state of Delaware.

### Please include the following information with your application:

- A. A brief essay describing why you desire a DSGA scholarship, include your plans after college.
- B. Transcripts of your High School and College Grades.
- C. Two letters of reference.
- D. Describe any other scholarships for which you have either applied or received.
- E. If there is any financial hardship, please explain.
- F. A list of your golf accomplishments.
- G. A list of your other activities, clubs, etc.
- H. Please list any association you or your immediate family may have with Delaware Junior Golf Scholarship Fund Board Members.

Please limit application to 12 single sided pages.