

Andrew J. Oswald Memorial Scholarship Program Scholarship Application Rules and Guidelines



Background

Andrew Oswald (#4) was a lacrosse standout for Pope High School from 2002-2004. In his senior season, he was honored as the team's Most Valuable Offensive Player. Lacrosse was his passion.

Andrew died in July 2005 due to injuries sustained in a car accident. The Andrew J. Oswald Memorial Scholarship Program seeks to honor Andrew's memory by promoting teen safety initiatives, encouraging responsible choices by teens, supporting the growth of the game of lacrosse in Georgia, as well as the academic endeavors of those who love the game and plan to play lacrosse in college.

A \$1000 per year scholarship will be awarded to Georgia High School lacrosse player (boy or girl) ***who will play lacrosse in college***. The scholarship is renewable for 3 additional years, provided the student continues to play lacrosse each year.

The scholarship was first awarded in 2006.

Rules and Guidelines

Applications will be considered on the following merits:

- ❖ Making Good Choices: Part of the mission of the Andrew Oswald Memorial Fund involves the encouragement of responsible choices by teens. When faced with a difficult challenge, how have you made a good choice or helped others make a good choice and what impact did it have?
- ❖ Contributions to lacrosse, your team, your school and/or your community: How have you specifically made a positive impact in one of the aforementioned areas?
- ❖ Two letters of recommendation: One letter will be from a teacher, guidance counselor, work supervisor or other adult who knows you well. The other letter will be from your lacrosse coach (or another coach).
- ❖ Complete Application Submitted on Time: Please review carefully and ensure complete, including appropriate signatures, and ***ensure application arrives by the due date***.
- ❖ Confirmation of college lacrosse plans: To be eligible for this scholarship, you ***must play lacrosse in college***.

Applications will be evaluated by an impartial panel made up of at least 3 scholarship advisory board members. Winner will be advised of the award by phone and email.

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Application Deadline April 1, 2017

Type or Print all Information Except Signatures

Applicant Data

LastName _____ First _____ Middle _____

Address: _____

Phone: _____

Email Address: _____

Parents' Names: _____

Date of Birth: _____ Age as of 4/1/17: _____

Male/Female _____

High School Data

Name of High School: _____

Years of Attendance (circle): 9 10 11 12

Years Played Lacrosse (circle): 9 10 11 12

(If your school did not have a team for all four years, please indicate year High School team started): _____

Circle the number of years you have played lacrosse at each level:

Varsity: 1 2 3 4 JV 1 2 3 Youth League _____

Class of 2017? Yes/No (Circle)

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College/University Data

Please indicate the name of the university or college you plan to attend and play lacrosse. Use official school names. Do not use abbreviations.

City _____ State _____

____ 4 year College or University

____ 2 year Community or Junior College

____ Other (explain) _____

Work Experience/Activities/Awards/Honors

Please answer all that apply. If additional space is needed, please use an additional piece of paper (indicating your name).

Work Experience:

<u>Employer/Position</u>	<u>Dates (From – To)</u>	<u>Hours/week</u>
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_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

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Activities/Awards/Honors: List all school/community activities in which you have participated during the past 4 years (e.g. sports, student government, music, Boy/Girl Scouts, volunteer, Special Olympics, Habitat for Humanity, etc.). Note all special awards, honors and offices held.

<u>Activity</u>	<u>Yrs. participated</u>	<u>Special Awards/Honors</u>	<u>Offices Held</u>

Additional Questions

Please answer the following questions. You may type or write your answers and they may be included on a separate sheet of paper, if desired. *Please staple or attach all additional pages and letters of recommendation to the application and include your name on each sheet.*

1. Young people are often faced with difficult choices. Please describe a time when you were faced with a difficult challenge and made a good choice or helped others make a good choice. What impact did it have?

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2. What has been your most significant contribution to the sport of lacrosse, your team, your school and/or your community? Please be specific and describe the impact your contribution has had.

3. Attach 2 letters of recommendation. One letter should be from a teacher, guidance counselor or other adult who knows you well (such as a leader of another community activity, employer, etc. May NOT be a family member). The other letter should be from your lacrosse coach (if not possible, then another coach). Applications will not be accepted without a completed, signed application, transcript and both letters of recommendation.

[Transcript Information](#)

Include a high school transcript of grades and have the section completed by the appropriate school official.

Applicant ranks _____ in a class of _____

Cumulative GPA _____/4.0 scale

SAT Score: _____(Reading) _____(Math) _____(Writing)

ACT Score: _____

School Official's Signature: _____

Title: _____ Date: _____

Phone Number: _____

Address: _____

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Application Checklist

The student is responsible for submitting all materials completely and on time. Incomplete applications will be delayed until all materials are provided. *Please carefully follow all directions and ensure application is complete.* This application becomes complete and will be evaluated only when the following are received:

- _____ Application Form
- _____ Current Complete Transcript of Grades
- _____ 2 Letters of Recommendation

All materials must be mailed or delivered to the following address **on or before the deadline:**

Andrew J. Oswald Memorial Scholarship Program
2702 Long Lake Terrace
Roswell, GA 30075
Questions may be addressed to: the_oswalds@ajo4lax.com
Or 678.777.3041

Certification:

By signing and submitting this application, I am agreeing to the conditions stated on the Scholarship Application Rules and Guidelines. **I attest that I completed this application and the information provided is truthful. I understand that I can be disqualified if I do not submit a truthful application that was completed by me.**

Student Signature and Date

Parent Signature and Date

Application Deadline is April 1, 2017