



SCHOLARSHIP PHILOSOPHY & POLICY STATEMENT

The Mission of the Jackson Hole Ski & Snowboard Club is to inspire fun, fitness, sportsmanship, and personal achievement in young athletes through training, academic support, and competition. The Scholarship Program was established to ensure that the many costs involved in ski racing, especially at the Regional and National levels, would not be the limiting factor to continued participation in the sport.

The Scholarship Program is administered by a committee consisting of the JHSC Executive Director and three Board Members. Scholarship Awards are confidential and final. Limited funds are available and we encourage you to apply early. All program participants must pay a portion of their fees. At some time in the future, all scholarship recipients are expected to make contributions of time or money back to the program.

Grant applications will be reviewed based on the following, equally important criteria:

1. Need
2. Academic Performance (3.0 GPA)
3. Commitment to the JHSC Program
4. Citizenship, Leadership, and Sportsmanship
5. Skiing Ability

If you have any questions on the application process, please contact the Administrative Office at 307.733.6433.

APPLICATION CHECKLIST:

_____ **Completed Financial Statement** – use attached form

_____ **Grade Report** – a copy of your most recent grade report

_____ **Coach Recommendation (optional)** – a letter of recommendation from your coach

_____ **Special Circumstances** – We encourage you to brief us on any special family circumstances that would be helpful to us in this process (attach a separate sheet).

_____ **Financially Independent** – If you are a financially independent athlete applying for a scholarship, you must include a signed letter from both parents acknowledging such. Also, please submit a financial statement.

Jackson Hole Ski & Snowboard Club
Application for Financial Aid
Submit to: JHSC Scholarship Committee
PO Box 461
Jackson, WY 83001

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1) PERSONAL INFORMATION

Applicant _____ SSN _____
Parent/Guardian _____
Mailing Address _____
Home Phone _____ Cell Phone _____
USSA Points (if applicable) DH _____ SG _____ GS _____ SL _____
USSA Age Class (if applicable) _____
Current GPA _____ Cumulative GPA (if applicable) _____
Were you employed over the summer? _____ Employer: _____ Earnings: _____
Did you attend summer ski camps? _____
Location: _____ Dates: _____ Cost: _____

2) PROGRAM TUITION GRANT (USE FOR PROGRAM FEE SCHOLARSHIP REQUESTS)

Program (check one) Alpine Nordic Freeride

Team _____

ANTICIPATED EXPENSES

JHSC Program Fee _____

Equipment _____

Total Amount Requested _____

-OR-

3) TRAVEL GRANT (USE FOR TRAVEL SCHOLARSHIP REQUESTS)

Submit 10 days prior to trip when possible. This must be completed for each project for which you are requesting aid. Financial forms, if already on file, do not need to be resubmitted.

Event _____

Location _____ Dates _____

ESTIMATED COSTS

Transportation _____

Entries / Lifts _____

Food _____

Lodging _____

Total Amount Requested _____

Why is this event important this season? _____

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4) FINANCIAL STATEMENT

ASSETS & LIABILITIES			
ASSETS		LIABILITIES	
Cash		Notes due to Banks	
Cash Value of Life Insurance		Other Notes Payable	
Securities		Bills Payable	
Real Estate Owned		Real Estate Mortgages	
Notes and Receivables		Liens/Assessments Due	
Personal Property		Other Debts	
Other Assets			
TOTAL		TOTAL	
INCOME & EXPENSES			
INCOME		EXPENSES	
Salary, Bonuses, Commissions		Taxes	
Self-Employment Income		Insurance Premiums	
Dividends/Interest		Mortgage Payments	
Rental/Lease Income (Net)		Rent Payments	
Other Income		Other Expenses	
TOTAL		TOTAL	

5) AUTHORIZATION

The information provided in this application is provided for the purpose of obtaining a grant through the Jackson Hole Ski Club Scholarship Program. Applicant acknowledges that the representations made in this application will be relied on by the Scholarship Committee in its decision to grant such scholarship. This application is true and correct in every detail and accurately represents the financial condition of the applicant on the date given below. Applicant will promptly notify Scholarship Committee of any subsequent changes which would affect the accuracy of this application. The undersigned declares that the applicant has read and understands the statements above.

Applicant _____

Parent/Guardian Signature _____ Date _____