

SPORTING CALIFORNIA USA

24/25 Scholarship Cover Letter



CHAPTER: (Check One)

- | | | |
|-----------------------------------|---|--------------------------------|
| <input type="checkbox"/> NORTH | <input type="checkbox"/> SAN GABRIEL VALLEY | <input type="checkbox"/> WEST |
| <input type="checkbox"/> CORONA | <input type="checkbox"/> VENTURA | <input type="checkbox"/> SOUTH |
| <input type="checkbox"/> REDLANDS | <input type="checkbox"/> BAKERSFIELD | |

PLAYER NAME:

TEAM/COACH:

SCHOLARSHIP AMOUNT REQUESTED: \$

DIRECTOR JUSTIFICATION/NOTES:

DIRECTOR SIGNATURE:

Office Use Only:

Scholarship Approved: No Yes Amount \$

Date:

DOC (PJ) Signature: _____