OVAC COMMISSIONERS' SCHOLARSHIP

- The recipient of this scholarship shall be an OVAC academic athlete who needs and deserves financial assistance in acquiring training beyond the high school level.
- 2. The amount of the scholarship shall be \$2,000.00 for the year. This scholarship is for one year only. There will be one (1) scholarship awarded.
- 3. The scholarship may be awarded for any accredited college or university as well as any technical or business school. Payment of the award will be made to the student upon proof (transcript) that they successfully completed their first year of school. IF THE SCHOLARSHIP IS NOT CLAIMED BY DECEMBER 31, 2025, IT SHALL BE FORFEITED.
- 4. The check shall be made out to and mailed to the applicant unless otherwise requested.
- 5. Candidates for this scholarship must be seniors who qualify on the basis of financial need, character, leadership, citizenship, participation in activities, and scholarship. They must have at least a 3.2 GPA on a 4.0 GPA (unweighted) scale, have an ACT test composite of 23 or better (SAT composite of 1560 or better), and participate in an OVAC-sponsored sport for at least two (2) out of four (4) years including their senior year.
- 6. The final date for receiving scholarship applications shall be **MARCH 22, 2024**.
- 7. Each school is permitted **ONE (1) applicant**, male or female.
- 8. In case the winner becomes ineligible or refuses this award, an alternate will be selected by the committee.
- 9. The final decision on the awarding of the scholarship shall be made by the Scholarship Committee of the Ohio Valley Athletic Conference.
 - 10. Mail this completed application directly to:

DIRK DeCOY,
OVAC Executive Director
62771 Keystone Dr.
Bellaire, OH 43906

MUST BE POSTMARKED BY MARCH 22, 2024

This information will be kept confidential and will be destroyed after use.

FULL NAME:
SCHOOL:
HOME ADDRESS:
CITY:
STATE:
ZIP:
PHONE NUMBER:
(
COLLEGE ATTENDING:
MAJOR:

FOR COMMITTEE USE ONLY:

Leadership/Activities	
Financial	
Academics	
Athletics	
TOTAL	

FATHER'S NAME:	FINANCIAL		
	1. What is the ENTIRE family's yearly gross income based on last year's W-2 form?		
OCCUPATION:	\$		
MOTHER'S NAME:	2. Number of children in family;		
OCCUPATION:	Number of children living at home (including yourself);		
	Siblings attending college (current year)		
	ACADEMICS		
LEADERSHIP & ACTIVITIES	Grade Point Average (on an un- weighted 4.0 scale. If you use otherwise, con-		
Please check the following activities that you	vert it to a 4.0 scale before submitting.)		
have been involved with over your past four years in high school:	Class Rank: out of		
Class officer	ACT Composite Score		
National Honor Society	SAT Composite Score		
NHS officer	Student's Signature:		
Student Council/Government			
SC officer	Coach's Signature:		
Boys' State/Girls' State (Delegate only; not alternate)			
National Merit Qualifier	Guidance Counselor's Signature:		
JETS	Principal's Signature:		
Only the above activities are considered. PLEASE DO NOT ADD any others.			

A certified transcript must accompany this application.

ATHLETICS

LIST/CIRCLE YEARS YOU **COMPETED** IN VARSITY SPORTS:

Sport:	Sport:				Please check all which apply:		
	9	10	11	12		Baseball	
Sport:	·					Basketball	
	9	10	11	12		Bowling	
Sport:	:					Cross Country	
	9	10	11	12		Football	
Sport:	:					Golf	
	9	10	11	12		Soccer	
LIST/CIRCLE YEARS YOU <u>LETTERED</u> IN VARSITY SPORTS:				OLLI ETTEPED IN		Softball	
				DO <u>LETTERED</u> IIN		Swimming	
Sport:	·					Tennis	
	9	10	11	12		Volleyball	
Sport:	·					Wrestling	
	9	10	11	12	Have you every		
Sport:	:				any of the followin	n CHAMPIONSHIP honors in g (individual or as a relay team	
	9	10	11	12	member).	deiale apply	
Sport:	:				Please check all w -		
	9	10	11	12		Swimming	
					Track		

OVAC ATHLETIC HONORS

Have you ever received ${f ALL\text{-}CONFERENCE}$ FIRST TEAM honors in any of the following

Wrestling

(you would have received a certificate for this).