



Lakota Athletic Participation Fee Fund Application

Lakota families looking for assistance with their children's athletic fees are encouraged to apply for grant consideration. A fund held at the Community Foundation has been established by private donations to cover half of the athletic fee assessed to students participating in sports within Lakota Schools.

This scholarship opportunity is for students in grades 7-12. Families interested in applying for consideration must submit this application to the Community Foundation of West Chester/Liberty. A limited number of scholarships are available. Only one scholarship per student will be awarded in a school year.

Deadlines for consideration during the 2018-2019 school year:

FALL SPORTS	Friday, August 2, 2019
WINTER SPORTS	Friday, October 18, 2019
SPRING SPORTS	Friday, January 24, 2020

Deadlines will NOT be extended for any reason. All applications must be submitted prior to the established deadlines above.

All applications will be reviewed by a Selection Committee comprised of West Chester and Liberty Township residents. Applications should be submitted to:

The Community Foundation of West Chester/Liberty
Attn: Lakota Athletic Participation Fee Fund
8366 Princeton-Glendale Dr., Suite A2
West Chester, Ohio 45069
FAX: 513.874.5472
EMAIL: karen.gibbs@wclfoundation.org

To learn more about The Community Foundation, please call 513.874.5450 or visit the website www.wclfoundation.com



Lakota Athletic Participation Fee Fund Scholarship Application

Personal Information		
Name:	Date of Birth:	Male Female
Address:	Current School:	
	Current Grade	Email:
Sport (i.e. Football, Track, etc.):	Season: Fall Winter Spring	
Coach:	Phone:	Email:
Parent/Guardian Name:	Phone:	Email:

Have you previously received a scholarship from the Lakota Athletic Participation Fee Fund? Yes No
 If yes, year _____.

Letter (submitted on a separate piece of paper)

In addition to the application above all requests should include a letter requesting assistance from the Lakota Athletic Participation Fee Fund. The letter must include:

- A detailed rationalization and insight into the family's hardship.
- The benefit provided to the student by participating in athletics
- Insight into the family's ability to cover half of the athletic fee charged to the student.

Special note: If the above is not covered in detail, the applicant will be denied based on insufficient information. Please take the time to write the letter describing need.

We affirm the information requested is accurate to the best of our knowledge. We understand misrepresentation may constitute fraud which may result in the loss of this scholarship or which may have legal consequences. We also give our permission to the Community Foundation to publicize in the newspaper and publications of the Foundation the acceptance of this award.

 Student/Applicant Signature Date

 Parent/Guardian Signature Date