

DON COLLINS MEMORIAL SCHOLARSHIP

Dear Senior,

The Plano Youth Soccer Association, Inc. annually sponsors the **DON COLLINS MEMORIAL SCHOLARSHIP** for graduating Seniors LIVING within Plano Independent School District boundaries. The scholarships are awarded to a minimum of six (6) students selected by our Scholarship Committee. The awards in the amount of \$2,000 each are forwarded directly to the college of their choice to defray the cost of tuition and other expenses.

Eligible seniors must be current soccer players either through PYSA or their high school and/or current referee/linesman.. Criteria considered for selection includes academic standing, years of soccer participation & dedication, financial need, personal contributions to the community and personal recommendations.

The application and all required materials are due by Friday, **March 19, 2021**. Please return by mail or in person to:

**PLANO YOUTH SOCCER
DON COLLINS MEMORIAL SCHOLARSHIP COMMITTEE
221 West Parker Rd., Ste. 480
PLANO, TEXAS 75023**

The office is open 8:00am to 5:00pm, Monday through Friday. Should you have any questions, please contact the office at 972-422-7972.

Sincerely,

George Ostrander

George Ostrander
Chairperson, Don Collins
Scholarship Committee

DON COLLINS
MEMORIAL SCHOLARSHIP
(Sponsored by Plano Youth Soccer)
APPLICATION
(PRINT CLEARLY ON THIS FORM)

Applicant Name: _____ Graduation Date: _____ SSN: ____ - ____ - ____ : (necessary if recipient)

Address: _____ Phone: () _____ - _____

Father/Guardian Name: _____ Phone:(cell) _____ - _____ Email: _____

Mother/Guardian Name: _____ Phone:(cell) _____ - _____ Email: _____

Have you been? A Linesman Yes No A Referee Yes No A Player Yes No

Number of years played Soccer: _____ Current Team Name _____ League _____

Coaches Name: _____ Recreational Competitive

Number of years as a Linesman _____ Number of years as a Referee _____

Assignors Name _____ Phone: _____ - _____ League: _____

High School attended: _____ GPA: _____ Class Rank as of January: number ____ of _____ (class size)

Scholastic Honors: _____

Extra curricular Activities: _____

Are you employed Yes No If yes, what is your normal work schedule? _____

Community Activities: _____

College Preference:	Applied	Accepted	Will Attend
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Do you have any disabilities the Scholarship Committee should be aware of? Yes No If yes, please explain:

Do you have a learning disability resulting in a 504 labeling on file at school? Yes No

Names of the two educators that will be completing the attached **Recommendation Report:** (Educator must complete and mail seperately)

(1) _____ How known _____

(2) _____ How known _____

What course of study do you plan to pursue? _____

Please state your reason for applying for this scholarship and why it would be important to you if granted: _____

Please state your goals in furthering your education: _____

Please state how the game of Soccer has influenced your life: _____

(Signature)

(Date)

Return the following :
COMPLETED APPLICATION (completed by applicant)
TWO RECOMMENDATION REPORTS (completed and mailed by educator)
FINANCIAL STATEMENT (completed by parents)
JANUARY VALIDATED HIGH SCHOOL TRANSCRIPT INCLUDING CLASS RANK (sent by Senior High)

TO: Plano Youth Soccer
DON COLLINS MEMORIAL SCHOLARSHIP COMMITTEE
221 West Parker Rd., Ste. 480
PLANO, TEXAS 75023

**DON COLLINS
MEMORIAL SCHOLARSHIP
(Sponsored by Plano Youth Soccer)**

APPLICANT'S RECOMMENDATION REPORT

(TYPE OR PRINT CLEARLY ON THIS FORM)

Applicant Name: _____ How long have you known the applicant? _____ years

How well do you know the applicant? ___Very Well ___Fairly Well ___Not Very Well

Please rate the applicant in the following areas:

	Superior	Above Average	Average	Below Average
Makes friends easily	_____	_____	_____	_____
Sets an example of good conduct for other students	_____	_____	_____	_____
Shows interest & concern for the welfare of others	_____	_____	_____	_____
Verbal communication with others	_____	_____	_____	_____
Adjusts to a busy schedule of activities without neglecting school work and other responsibilities	_____	_____	_____	_____
Shows self control and performs well	_____	_____	_____	_____
Capacity to read with accuracy and comprehension	_____	_____	_____	_____
Ability to do academic work at the college level	_____	_____	_____	_____
General Knowledge	_____	_____	_____	_____
Reliability and dependability	_____	_____	_____	_____
Judgement and reasoning ability	_____	_____	_____	_____
Cooperative (friendly, working with others)	_____	_____	_____	_____
Character, personality and social ability	_____	_____	_____	_____

General comments on the applicant and how he/she will perform at the college level: _____

PLANO YOUTH SOCCER THANKS YOU FOR YOUR TIME, CONCERN AND COOPERATION.
Please complete and return directly to Plano Youth Soccer
Plano Youth Soccer, 221 West Parker, Ste. 480, Plano Texas 75023

Name _____

Signature _____

Date _____

DON COLLINS MEMORIAL SCHOLARSHIP FINANCIAL STATEMENT

(PRINT CLEARLY ON THIS FORM)

Applicant Name: _____ SSN: _____ - _____ - _____ (necessary if recipient)

Father/Guardian Name: _____ Mother/Guardian Name: _____

Address: _____ Address: _____

Phone: _____ Phones: _____

Occupation: _____ Occupation: _____

Employer: _____ Employer: _____

Address: _____ Address: _____

Phone: _____ Phone: _____

Siblings Names	At Home (yes or no)	Grade/College	Support from family (yes or no)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Fathers Gross Income: _____ Below \$10,000 _____ \$10,000-20,000 _____ \$20,000-30,000 _____ \$30,000-40,000
 _____ \$40,000-50,000 _____ \$50,000-75,000 _____ \$75,000-100,000 _____ Over \$100,000

Mothers Gross Income: _____ Below \$10,000 _____ \$10,000-20,000 _____ \$20,000-30,000 _____ \$30,000-40,000
 _____ \$40,000-50,000 _____ \$50,000-75,000 _____ \$75,000-100,000 _____ Over \$100,000

Family Savings: _____ Below \$2,000 _____ \$2,000-5,000 _____ \$5,000-10,000 _____ \$10,000-20,000
 _____ \$20,000-30,000 _____ \$30,000-50,000 _____ \$50,000-100,000 _____ Over \$100,000

Other Income: Stocks/Bonds \$ _____ Pension \$ _____ Social Security \$ _____ Child Support \$ _____
 VA Benefits \$ _____ Other \$ _____ How Generated _____
 Other Awards/Gifts for Applicant \$ _____ (list separately)

Property owned (excluding home) Business \$ _____ Auto(s) Type, Yr, \$ _____
 Land \$ _____ Vacation home/camp \$ _____ Other \$ _____

Debts: \$ _____ Mortgage/Rent (monthly) \$ _____ Car loan/lease payment \$ _____ Credit Cards (total)
 \$ _____ Other loans (list separately)

Please explain any unusual financial circumstances and/or hardships that affect your family: _____

Estimated cost of the college the applicant plans to attend: \$ _____ Tuition \$ _____ Room/board \$ _____ Travel
 \$ _____ Other (please explain) _____

Does the applicant plan to work while attending college _____ Yes _____ No If yes, what percentage of total expenses will he/she earn? _____ %
To the best of my knowledge, the above information is true and correct.

Signature (Parent/Guardian) _____ Applicant _____ Date _____