



**George Roach Snow Sport Scholarship Committee**  
**Scholarship Application Information**  
**Ski For The Health Of It**  
**2017-2018 Season**

Any school age student, Grade 4 or older in good standing with attendance in their school, is eligible to apply for the George Roach Snow Sport Scholarship. This scholarship will cover the cost of lift tickets, lessons, and rental equipment of your choice for a period of 8 weeks with your school program.

Selection will be based upon such factors as:

- Financial need
- Public School participating in Anthony Lakes School Programs
- Past Scholarships received
- Past School Program participation
- Advisor Statement/Recommendation

The Application Process:

1. Complete Scholarship Application Forms.
2. Have school Representative/Advisor/Director complete statement of financial need and benefit of participation.
3. Return completed application (2 pages): Please turn in scholarship application attached to "Ski For The Health Of It" program registration forms to the school office. Registration and Scholarship Application must accompany one another to be considered.
4. Award will be granted prior to first day of lessons for your school.

Any questions, please contact:

Alice Trindle at 541-519-7234 or Kay Stoneberg at 541-910-8095

\* No faxes or emails accepted\*



**George Roach Snow Sport Scholarship Committee  
Scholarship Application, Applicant Details  
Ski For The Health Of It - 2017-2018 Season**

This is a school program fee for Anthony Lakes Ski/SB/XC School Program (lessons, lift/trail tickets, and rental equipment). Applicant will be expected to pay other miscellaneous expenses as needed.

Applicant Name: \_\_\_\_\_ Grade Level: \_\_\_\_\_ Date: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone No. \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Parent Name: \_\_\_\_\_ Parent Signature: \_\_\_\_\_

Have you been the recipient of a scholarship in the past five years? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you participated in past school ski programs with Anthony Lakes? Yes \_\_\_\_\_ No \_\_\_\_\_

What snow sport discipline will you be choosing: Ski \_\_\_\_\_ Snowboard \_\_\_\_\_ Nordic XC \_\_\_\_\_

What is your skill level? Beginner \_\_\_\_\_ Intermediate \_\_\_\_\_ Advanced \_\_\_\_\_

Explain how a scholarship would benefit you:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you have any special needs that need to be addressed or made aware of? If so, what:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



**George Roach Snow Sport Scholarship Committee  
Scholarship Recommendation  
Ski For The Health Of It - 2017-2018 Season**

**School Program Teacher/Advisor Statement**

Applicant's Name: \_\_\_\_\_ Grade Level: \_\_\_\_\_ Date: \_\_\_\_\_

Advisor/Director Name: \_\_\_\_\_

Advisor's Phone: \_\_\_\_\_ Advisor's Email: \_\_\_\_\_

School Name: \_\_\_\_\_ # of weeks: \_\_\_\_\_

This is a scholarship program fee for Anthony Lakes to provide lessons, lift tickets, and rental equipment for \_\_\_\_\_ weeks. The applicant will be responsible for other miscellaneous expenses as needed. In order to assist us in evaluating this request, please respond to the following questions.

1. Are you aware of any information relative to the applicant's financial need? If so, please comment.

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2. Do you think granting this application would benefit this individual? If so, how?

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3. Are you aware of any other information you think the committee should be aware of regarding the applicant? If so, what?

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4. Are there any special needs that need to be addressed or be made aware of? If so, what?

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