

## CANTON YOUTH SOCCER ASSOCIATION SCHOLARSHIP APPLICATION

Applicant's Name:						
Applicant's Address:						
Applicant's Email:						
High School Attended:						
College Attending:		Are you playing s	occer there	? Yes	or	No
Anticipated total annual cost to you	r family:					
Siblings Currently Attending College	:					
Name	Grade	Schoo	l			
1.						
2.						
3.						
List all CYSA & HS teams (Grade 3 –	12) you hav	e played on. Be su	ure to list th	ne coacł	n as v	well.
If you have ever served as a USSF of	ficial for CY	SA, please provide	details bel	ow:		

If you have volunteered for CYSA in the past, please provide details below:

Please share details about any other community service you have performed in the past:

•	• /	ugh your soccer and/or your high sc you would share with any person in t	
school to help	them prepare for high school. (	500 words or less)	

Please include a copy of your most recent transcript.

Student Signature:

Date

Parent Signature:

Date: