

**AARON DAVIES MEMORIAL
BASKETBALL SCHOLARSHIP**

SCHOLARSHIP REQUIREMENTS

1. Applicant must be a graduating senior of Weir High School. The scholarship will be a one-time only award to an individual. No post-graduate applications will be accepted.
2. The scholarship will be awarded to a basketball player(s). Applicant must have been a member of WHS basketball team at least two (2) years (9-12).
3. Applicant must earn a **3.0 GPA** or higher and has plans of attending a four year college.
4. Applicant must have good character; demonstrate good sportsmanship and leadership on the court and in the classroom.
5. The applicant must provide two (2) personal letters of recommendations from teachers, principals, ministers, coaches whom they have known for at least 2 years. No relatives are permitted to be references.
6. Applicant must write 200 words or more on **what role basketball has played to overcome adversity, develop their character and help to achieve future success?**
7. The scholarship will be available to qualified students regardless of race, color, religion, sex, or national origin.
8. The final decision on the awarding of the scholarship shall be made by the Aaron Davies Memorial Basketball Scholarship Committee. All decisions are final.
9. The application is due to Guidance by _____

Type a 200 word or more essay on what role basketball played to overcome adversity, develop your character and how it will help you achieve future success?

We hereby grant permission to school officials to release to the scholarship committee a copy of the applicant's transcript of grades, class rank and any other school-related information that would help the committee select the scholarship recipient

We certify the information provided within this application is both complete and accurate to the best of our knowledge. Any false information will result in the disqualification of the application and we agree to return ALL funds awarded. We understand this scholarship is to be applied to tuition and education-related expenses ONLY.

Student's Signature: _____ Date: _____

Parent/Guardian's Signature: _____ Date: _____

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LETTER OF RECOMMENDATION FORM**

Scholarship applicant's Name _____
Last First Middle

How long have you known the Applicant _____ years?

Please circle your response to the following statement:

To the best of your knowledge the applicant's leadership abilities and character is:
Excellent Good Fair Poor

Provide recommendation on the sheet (in order to maintain anonymity do not use the student's name in your comments).

Signature _____ Position/Title _____ Date _____