

# BEAVER DAM YOUTH BASEBALL & SOFTBALL

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## Scholarship Application

Name: \_\_\_\_\_

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

Please list the years and leagues/age levels you played for a Beaver Dam Youth Baseball and Softball team:

Year(s): \_\_\_\_\_ League/Age Level: \_\_\_\_\_

Year(s): \_\_\_\_\_ League/Age Level: \_\_\_\_\_

Year(s): \_\_\_\_\_ League/Age Level: \_\_\_\_\_

Year(s): \_\_\_\_\_ League/Age Level: \_\_\_\_\_

Year(s): \_\_\_\_\_ League/Age Level: \_\_\_\_\_

Year(s): \_\_\_\_\_ League/Age Level: \_\_\_\_\_

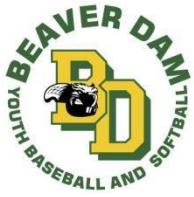
Please list any work and/or volunteering (other than playing) you have done with Beaver Dam Youth Baseball and Softball in the summer months (helping a coach, concession stand, umpiring, etc.). Please use a separate sheet of paper if you need more room.

- |    |       |             |
|----|-------|-------------|
| 1. | _____ | Year: _____ |
| 2. | _____ | Year: _____ |
| 3. | _____ | Year: _____ |
| 4. | _____ | Year: _____ |
| 5. | _____ | Year: _____ |

What university, college, or technical college will you be attending in the fall of 2024?

\_\_\_\_\_

Will you be playing an inter-collegiate sport in college? \_\_\_\_\_



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If yes, what sport? \_\_\_\_\_

On a separate sheet of paper, please answer the following questions:

1. Why did you participate in the Beaver Dam Youth Baseball and Softball Association program?
2. Please describe any experiences you had as a member of the Beaver Dam Youth Baseball and Softball Association that have had a positive impact on your life.
3. What life lessons did you learn as a result of participating in the Beaver Dam Youth Baseball and Softball program?
4. What other activities, sports, etc. have you participated in (outside of Beaver Dam Youth Baseball and Softball)?
5. Any other comments or information you wish to share with the Scholarship Committee.

Please provide letters of recommendation from two people in the community. They may be coaches, teachers, employers, advisors, etc. Please keep the letters to one page per person.

Recommendations:

1. Name: \_\_\_\_\_ Relationship to you: \_\_\_\_\_
2. Name: \_\_\_\_\_ Relationship to you: \_\_\_\_\_

Please submit by April 21, 2024. Send completed applications to  
[bdybs.secretary@gmail.com](mailto:bdybs.secretary@gmail.com)