



**OMAHA HOCKEY CLUB HIGH SCHOOL CLUB HOCKEY  
EDUCATION FOUNDATION GRANT APPLICATION**

*Instructor, Guidance  
Counselor, Principal, Vice  
Principal (choose one)  
Recommendation*

Applicant's Name: \_\_\_\_\_

Instructor's Name: \_\_\_\_\_ School: \_\_\_\_\_

Phone # \_\_\_\_\_ Course(s) \_\_\_\_\_

Grade Level \_\_\_\_\_ # Of Hours per day \_\_\_\_\_

Ranking in class (scale of 1-10) \_\_\_\_\_

**Please evaluate the applicant in the following areas with the following scale.**

Excellent = 1    Above Average = 2                      Average = 3                      Below Average = 4

- |                                 |  |
|---------------------------------|--|
| 1. Self Motivation _____        | 9. Extracurricular involvement _____                           |
| 2. Scholastic Achievement _____ | 10. Work Ethic _____   |
| 3. Creativity _____             | 11. Getting along with others _____                            |
| 4. Cooperation _____            | 12. Leadership potential _____                                 |
| 5. Dependability _____          | 13. Honesty _____  |
| 6. Responsibility _____         | 14. Completes assignments fully,<br>properly and on time _____ |
| 7. Attitude _____               |  |
| 8. Initiative _____             |  |

Remarks \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_