



# SANTA CLARA VALLEY HOCKEY ASSOCIATION

## Christopher Keil Memorial Scholarship Application

CONFIDENTIAL

**NOTE: PLEASE MAKE SURE TO PRINT CLEARLY / LEGIBLY**

Date of Application: \_\_\_\_\_

\_\_\_\_\_  
Name of Player

\_\_\_\_\_  
Age

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
Zip

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Date registered with SCVHA for 2018/2019 season:

Number of years with SCVHA:

List last season's team, in-house or beginner program:

Current age division (Mite, Squirt, PeeWee, Bantam,  
Midget):

Current level (AA, A, or B)

Tier II Experience:

Hockey school/clinics attended summer 2018:

Grade point average (June 2018):

(Please attach copy of report card)

Is player employed?

Monthly Income:



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Player comments:

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	Parent 1 Information	Parent 2 Information
Name:		
Address:		
City/Zip		
Employer:		
Work Phone No.		
Email:		



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Total Family Income Last Year (2017):	\$
Attach copies of 2017 Income Tax Returns & supporting W2's)	
Current Monthly Income 2018 (Parent 1):	\$
Current Monthly Income 2018 (Parent 2):	\$
Monthly Mortgage/Rent:	\$
Number of Dependents:	
Other dependents registered with SCVHA:	
Volunteer positions held or will accept with SCVHA:	

Please describe your current financial situation and elaborate on any particular hardship or problem that is prompting you to apply for this scholarship.

For example: unemployment, disability, bankruptcy, child support payments, wage garnishments, tax problems, divorce, death in immediate family, etc... Please attach all supporting documentation that could validate these issues.

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**WE DECLARE THAT ALL INFORMATION SUBMITTED IS CORRECT TO THE BEST OF OUR KNOWLEDGE.**

Player Signature: \_\_\_\_\_

Parent 1 Signature: \_\_\_\_\_

Parent 2 Signature: \_\_\_\_\_



# **SANTA CLARA VALLEY HOCKEY ASSOCIATION**

## **Christopher Keil Memorial Scholarship Application**

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Applications **MUST** be mailed (post marked) or hand delivered delivery by **Sept. 15, 2018**. Late applications will be considered after on-time applications have been reviewed and if funds are still available.

**Return application with all appropriate copies to:**

**Phil Roth, SCVHA Scholarship Director**

**Phil Roth**

**2036 Harmil Way**

**San Jose, CA 95125**

**Or by email: [philiproth@sbcglobal.net](mailto:philiproth@sbcglobal.net)**