



## ***Scholarship Opportunities***

For the 2025-2026 competitive season, Strive Volleyball Club will be offering partial scholarships. Applicants will be required to submit a letter of recommendation as well as a justification of need to be considered. Applicants will be able to apply for 1 or 2 partial scholarships. The number of partial scholarships available will be dependent on the number of teams Strive Volleyball Club carries during the season. Families receiving a scholarship will commit hours of service to/on behalf of the club during the season (10 hours for 1 partial scholarship and 20 hours for 2 partial scholarships).

### Application:

- Letter of recommendation from a current or previous mentor (letter should address athlete's character, pursuit of excellence in life, resiliency to adversity, dedication towards having a growth mindset, and ways he/she has addressed failure in the past)
- Parent justification of need (formal documentation required)
- Number of partial scholarships requested (1 or 2)

Applications must be submitted by **October 23, 2025**. If a scholarship is granted, the amount available will be communicated at time of offer to join team.

### How to submit:

- Email the application to [strivevbc@gmail.com](mailto:strivevbc@gmail.com)
- Subject title: SCHOLARSHIP APP – (FIRST AND LAST NAME OF PLAYER)

<b><u>Numbers</u></b>	<b><u>Teams: 13s</u></b>	<b><u>Teams: 14s-18s</u></b>
Total fees for the season (includes coaches fees, court rental, uniforms, equipment, etc.)	<b>\$2300</b>	<b>\$3,600</b>
1 Partial Scholarship (40% coverage)	\$920 earned in scholarship money <b><i>Remaining Cost to Player/Family: \$1,380</i></b>	\$1,440 earned in scholarship money <b><i>Remaining Cost to Player/Family: \$2160</i></b>
2 Partial Scholarships (80% coverage)	\$1840 earned in scholarship money <b><i>Remaining Cost to Player/Family: \$460</i></b>	\$2,880 earned in scholarship money <b><i>Remaining Cost to Player/Family: \$720</i></b>



## ***Scholarship Application***

Thank you for your interest in a scholarship through Strive Volleyball Club. Please complete the application below and **return by October 23, 2025**. Applications will be reviewed by the Board of Directors. Players will know the status of their application if an offer to play for the club is extended.

Please note that each scholarship requires a commitment of hours volunteering at club functions during the season (10 hours for 1 partial scholarship and 20 hours for 2 partial scholarships).

How to submit:

- Email the application to [strivevbc@gmail.com](mailto:strivevbc@gmail.com)
- Subject title: SCHOLARSHIP APP 2025-2026 – (FIRST AND LAST NAME OF PLAYER)

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

Birthday: \_\_\_\_\_ Age Group: \_\_\_\_\_

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

Parent Phone: (cell or home) \_\_\_\_\_

Parent Email: \_\_\_\_\_

Player Phone: (cell or home) \_\_\_\_\_

Number of Scholarships Requested:                      1 Partial (40% Coverage)

2 Partial (80% Coverage)

\*Letters of Recommendation should be sent directly from your reference by email to [strivevbc@gmail.com](mailto:strivevbc@gmail.com)



## ***Letter of Recommendation***

Dear \_\_\_\_\_,

This season, \_\_\_\_\_ will be trying out for Strive Volleyball Club to help develop his/her/their skills as a volleyball player, person of influence, and teammate. In an effort to make the club volleyball experience more accessible to all families, we have instituted a scholarship program. Part of the application includes a letter of recommendation. Please reflect on \_\_\_\_\_'s character, their pursuit of excellence in life, their resiliency to adversity, and their dedication towards having a growth mindset. Additionally, please list one way this individual has dealt with failure in the past.

Thank you for your assistance with this process and for sending your letter of recommendation to [strivevbc@gmail.com](mailto:strivevbc@gmail.com) by October 23, 2025.

Sincerely,  
Strive Volleyball Club



## ***Justification of Need***

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

Birthday: \_\_\_\_\_

Dear Parents,

Thank you for your interest in a scholarship through Strive Volleyball Club. We understand the financial commitment that comes with a season of club volleyball and hope to help make the opportunity more accessible to players in our region. Scholarship applications will be reviewed by our Board of Directors. Families will be told if/what form of scholarship has been confirmed if an offer to play for the club is extended. To ensure a fair review process for all who apply, please include **at least two** of the following forms of documentation:

- Statement of **Household** Income (e.g. Page 1 of 2024 Tax Return, 2 previous pay stubs)
- Documentation of Immediate Hardship (e.g. unemployment)
- Documentation of Assistance from a Federal/State Program (e.g. Medicaid, Foster Care, Free/Reduced Lunch, SSI, etc.)
- Current Household Bank Statement(s) (please remove/blackout account information)

Please use the next page to provide any additional information you believe would be important for Board of Directors to consider when determining financial support for the 2025-2026 season. Information provided will only be shared with the Board of Directors. Thank you for your time and information in this process.

Sincerely,  
Strive Volleyball Club

