



**SCHOLARSHIP APPLICATION TO ATTEND
THE 2010 JULIE FOUDY SPORTS LEADERSHIP ACADEMY (JFSLA)**

Personal Information:

Student Name: _____

Address: _____

City, State, Zip: _____

Student Date of Birth: _____

Parent/Guardian Email: _____

Parent/Guardian Day Phone: _____

Parent/Guardian Evening Phone: _____

Soccer Team/Club Name: _____

For Which Academy Location Are You Applying? : ____California ____New Jersey ____Chicago

How did you hear about the JFSLA? _____

How did you hear about this scholarship opportunity? _____

Is any organization sponsoring or assisting you with this application? If so, please identify this organization:

_____ Check here if you have previously attended the JFSLA.

_____ Check here if you have previously been awarded a scholarship to attend the JFSLA.

If you have attended the Julie Foudy Sports Leadership Academy on scholarship, which session did you attend (year and location)?

Please check one to identify the student's ethnicity. This information is optional.

- American Indian, Eskimo or Aleut
- Asian or Pacific Islander
- African-American
- Hispanic
- Caucasian
- Other

Financial Information*:

Parents/Guardians: Please provide the following information.

Parents'/Guardians' Taxable Income 2009 (after deductions and exemptions):

\$ _____ (line 43 of 2008 Form 1040 US Tax Return or line 27 of 2008 Form 1040A or line 6 of 2008 Form 1040EZ)

Parents'/Guardians' Estimated Taxable Income for 2010: \$ _____

Parent/Guardians: Using the space provided, please explain why your child is in financial need of a scholarship: _____

Please include any special circumstances (such as more than one child in college, excessive medical bills) or any other situations that may help the panel understand your financial need (please keep your answers to the space provided): _____

***NOTE:** If awarded this scholarship, you may be asked to submit your most recent tax forms to verify your financial information. All financial information will remain confidential and will be viewed only by our scholarship review panel. This panel could include a sponsor or individual benefactor who funded the scholarship.

Parent/Guardian Signature (Required):

I verify that to the best of my knowledge, I have given an accurate representation of our financial information.

X _____ **Date:** _____

Personal Statement:

New students applying: What does Leadership mean to you? Describe a person who you consider to be a leader with strong leadership skills.

Returning students applying: How have you applied the leadership skills you acquired while previously attending the Julie Foudy Sports Leadership Academy?

Former scholarship recipient applying: If you are chosen to receive a partial scholarship to attend the Julie Foudy Sports Leadership Academy, which specific leadership skill you acquired while at the Academy will you use to fundraise the remaining half of your 2010 tuition?

(Please type your answer to this question on a separate sheet of paper, not to exceed one page single-spaced.)

Statement by Coach, Teacher, or Adult Mentor:

Please explain why this student will benefit from a week at the Julie Foudy Sports Leadership Academy.

(Please type your answer to this question on a separate sheet of paper, not to exceed one page single-spaced.)

Please send your completed application to:

**The Julie Foudy Leadership Foundation
806 E. Avenida Pico, Suite I, #318
San Clemente, CA 92673**

****All scholarships are funded and determined by the Julie Foudy Leadership Foundation and its generous donors.****