



The 47 Fund

Scholarship Application Form

Child Applicant Information

Child's Name: Last _____ First _____ MI _____

Child's Birth Date: _____ Age: _____ Sex: _____ Male _____ Female

Home Address: _____

Parent or Legal Guardian Information

Parent or Legal Guardian: Last _____ First _____ MI _____

Father's Employer: _____ Work PH: _____

Mother's Employer: _____ Work PH: _____

Home PH: _____ Cell PH: _____ Email Address: _____

Child's Hockey Participation & References

Last Season Placement: _____ Age Division: (MT, SQ, PW, BT, MG): _____ Level (House, B, A, AA, etc.): _____

Hockey Coach: _____ PH: _____ Email: _____

Parent or Legal Guardian Acknowledgement

I am responsible for submitting the following information in order to apply and be considered for a scholarship. Email Application and complete packet to justin@47fund.com or mail to the above address.

- Completed Scholarship Application Form
- Copy of most recent income tax statement (IRS Form 1040)
- Parent letter explaining reason for request of scholarship
- Essay written by the child – suggested topics “What Hockey Means to Me”, “How working hard helps me with Hockey”, “What challenges I face and how hockey helps me”, “How I give back to my community”, “How I give back to the game I love”, or other topic that will help the scholarship committee know more about you and your passion.
- Provide any additional information for consideration on a separate sheet (Player GPA, report card, awards, community service, letter of recommendation from coach, etc.)
- Recent Digital Photo (Individual Hockey Photo preferred or School Photo)- with release to use photo on 47 Fund website.

I certify that the information on this form is accurate at this time and I understand that the 47 Fund Scholarship Committee will verify all information. Deliberate misrepresentation may result in termination of scholarship award. I will notify the Committee of any changes in our financial circumstances; and provide any requested information or documentation. I understand that these may result in revisions to the applicant's financial aid package and I assume all responsibility for payment of my fees for the St. Louis Rockets Hockey programs. Furthermore, I authorize the use of my child's name, image, photo, or likeness to be used by the St. Louis Rockets, on the 47fund.com website, and any announcements of scholarship awards in the event that they are awarded a scholarship.

Name of parent or legal guardian: _____

Signature of parent or legal guardian: _____

Date: _____

All scholarships are granted based on: Money Available for Distribution, Financial need of Applicant, Special Personal Circumstance