

IOWA SWIMMING, INC.
SCHOLARSHIP AWARD APPLICATION

APP-20

For ISI & Judy Hoffman Scholarship Awards

Application Deadline: **March 15**

Name: _____ Date of Birth: ____/____/____

Address: _____
_____ Phone: (____) _____ - _____

Parents Name's: _____

Address/Phone: (If different from above) _____

HIGH SCHOOL INFORMATION

High School: _____ City: _____

Year of H.S. Graduation: _____ Class Rank: _____ Grade Point: _____ ACT/SAT Score: _____

HS Honors: _____

List activities you have been involved in: _____

COLLEGE INFORMATION

College: _____ City/State _____

Major: (if known) _____ Plans to Swim: _____

Briefly state how you want to use your USA Swimming experience in college: _____

ISI INFORMATION

Swim Club: _____ ID# _____

Coach: _____ # of Years in USA Swimming Competition: _____

Swimming Honors: _____

List ways in which you have given service to your local swim club, ISI, or USA Swimming: _____

List on back or additional pages for space need:

List any national meets attended, event participation, place.

List past two years Iowa Swimming meets attended - events placed in Top 10 - Short & Long Course.

List meets attended and events participated in prior to the last two years - Short & Long Course.

OTHER INFORMATION

List other activities you have been involved in - church, community, etc. _____

Why do you feel deserving of this award: _____

ATTACH RECOMMENDATIONS FROM COACH, CLUB PERSON, AND COMMUNITY PERSON.
(State or amplify why they feel their candidate is especially deserving of this award.)

Send 5 typed copies of application to:
Iowa Swimming Office

Signature of ISI Club Official or Unattached ISI Swimmer