Capital Area Chapter of the Pennsylvania Sports Hall of Fame, Inc.
Scholarship Application for Seniors in
Dauphin County, Pennsylvania High Schools

$1,500 Scholarship Award

If this form is incomplete, inaccurate, illegible, not signed, or is postmarked or returned electronically after April 30, 2027, it will not be considered.

Applicant Name: _____

Home Address: _____

City: _____

State: _____Zip_____

Home Phone Number_____

Email_____

Sport(s) Participated in High School _____

School District_____ High School _____

GPA (To Be Completed by Counselor) _____ Class Standing (To Be Completed by Counselor) _____

Guidance Counselor_____ ___Phone number _____

Prospective College/University _____

Have you received an acceptance letter? Yes_____ No____

Are you a recipient of an athletic scholarship from this school? Yes ____ No _____

College/University_____

Address_____

State_____Zip_____

Intended Major_____

For consideration of this scholarship, please answer the following questions. Please use additional paper if needed. Attachments are encouraged. Please sign and date any additional paperwork that you provide.

1. What are your goals? Please describe how earning a college degree will help you achieve those goals.

2. What is the most challenging aspect of attending college for you? What are your plans to overcome that challenge?

3. Why should you be selected for this scholarship?
Please describe your: a) academic achievements, b) community service activities, c) examples of leadership, d) other personal characteristics that make you deserve this scholarship.

4. Describe an event during your life in which you took a leadership role and what you learned from that experience.

5. Name a person who graduated from your high school before 2016 that you believe is worthy of being nominated for our Hall of Fame_____

Applicant signature_____

Guidance Counselor signature_____