

# Prineville Swim Team Scholarship Application

**Parents: Please complete this section:**

Participant Name: \_\_\_\_\_  
Age: \_\_\_\_\_ DOB: \_\_\_\_\_  
Parent(s) Name: \_\_\_\_\_  
Stree Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Email Address: \_\_\_\_\_

\*If awarded this scholarship, a minimum of **10** hours of volunteer service is required to be fulfilled by the applicant and/or parent(s) at either of the home meets and/or swim-a-thon.

**Applicant: Please fill out this section:**

Why I want to be part of the Prineville Swim Team:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Being a good Teammate is important to me because:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What is your greatest strength? Explain.

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What is your biggest weakness? Explain.

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Who is your role model or has the biggest influence in your life and why?

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Why is swimming important to you?

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Please list three goals you would like to achieve by the end of the season.

- 1) 

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- 2) 

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- 3) 

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Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_