



# APPLICATION FOR 2019 LITTLE PEOPLE'S SCHOLARSHIP

(Please write clearly and legibly as you answer each question)

(Completed application MUST BE received at Tournament Headquarters before April 22, 2019)

Date \_\_\_\_\_

Applicant's Name \_\_\_\_\_ Age \_\_\_\_\_  
(last) (middle) (first) (nickname)

Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Current Address (if different from above) \_\_\_\_\_

Applicant's Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Family contact email address: \_\_\_\_\_

Family contact phone number (Day) \_\_\_\_\_ (Evening) \_\_\_\_\_

Applicant's Social Security (optional) # \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Gender: \_\_\_\_\_

Highest school grade completed by Father: \_\_\_\_\_ Mother: \_\_\_\_\_

Do your parents own or rent your home? \_\_\_\_\_

How many people are in your parents' household? \_\_\_\_\_ State of parents' legal residence: \_\_\_\_\_

Are you living with someone other than your parents? \_\_\_\_\_ If so, who, and relationship: \_\_\_\_\_

Parent/Guardian who is designated to receive reimbursement check: \_\_\_\_\_

Address of Designated Parent/Guardian \_\_\_\_\_

Who is your current golf professional? \_\_\_\_\_ Phone: \_\_\_\_\_

Where do you normally play the most golf? \_\_\_\_\_

What is your current grade in school? \_\_\_\_\_ What is your GPA? \_\_\_\_\_ Parent's initials \_\_\_\_\_

In 2018, did you, your parents, or anyone in your parents' household receive benefits from any of the Federal benefit programs listed? (check all that are applicable):

\_\_\_\_\_ Supplemental Security Income

\_\_\_\_\_ Food Stamps

\_\_\_\_\_ Free or reduced price school lunch

\_\_\_\_\_ Temporary assistance for Needy Families

\_\_\_\_\_ Special Supplemental Nutrition Program for Women, Infants and Children

**REQUIRED**

Please include a statement of 50 to 100 words from your golf teacher or professional telling about your enthusiasm for golf and your need for this Scholarship. This must be on the teacher or professional's letterhead.

ESSAY QUESTIONS FOR CANDIDATE:

Candidate must answer each of the following his/her self in 50 to 100 words or less. You may use additional paper if necessary. We request that **all answers be written in the applicant's own handwriting.**

Answers written by parent or person other than candidate, or on a computer, will not be considered.

- 1 Excluding the financial assistance of this scholarship, how would you benefit from being awarded this scholarship?
- 2 Other than golf, what are some of the other important things in your life?
- 3 How does playing the game of golf impact your life?
- 4 What are your current civic/extra-curricular activities?
- 5 What is your involvement with junior golf programs in your area?
- 6 Why do you need this Scholarship to be able to play in Pepsi Little People's?
- 7 Do you have any previous golf tournament experience? If so, explain.

Candidate and Parent/Guardian Agreement

I attest that all information contained within this application is true and accurate to the best of my knowledge. I authorize the Little People's Golf Championships Association (LPGCA) to verify any information provided on this application and authorize release to Little People's Scholarship Committee all information in this application and supporting documents. I understand that in order to be eligible for a Little People's Scholarship I must meet the Little People's Scholarship Committee minimum standards of character, financial needs and golfing ability. I also understand that the Little People's Scholarship Committee will make the final decision.

If accepted as a recipient of a Little People's Scholarship, I give the Little People's Golf Championships Association (LPGCA) permission to use film, video and/or photographs of the above-mentioned minor for lawful promotional or informational purposes. I also give permission to the LPGCA to tell my story to the media for purposes of promoting the Little People's Scholarship program. I understand that if the LPGCA does so, members of the media may contact me for comment. The LPGCA will protect the privacy of my personal financial information. Any information regarding financial status will only be made available to the Little People's Scholarship Committee, and will not be divulged to third parties.

\_\_\_\_\_ Date \_\_\_\_\_  
(Candidate's Signature)

\_\_\_\_\_ Date \_\_\_\_\_  
(Parent/Guardian's Signature)

Please return completed application and accompanying documents to:  
Little People's Scholarship Committee, 1600 Wapiti Circle #8, Estes Park, CO 80517. Application and accompanying documents must arrive at Tournament Headquarters BEFORE APRIL 22, 2019.