



# LYC Foundation

Dedicated to the advancement of the sport of sailing in the Mid-Atlantic area

## Scholarship Aid Application For Proposed Undergraduate Study

1.

Name of Applicant: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

e-mail \_\_\_\_\_ Phone \_\_\_\_\_

Birth Date: \_\_\_\_\_ Male\_\_\_ Female\_\_\_

2.

Name of High School: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number: \_\_\_\_\_

Expected Date of Graduation: \_\_\_\_\_

Guidance Counselor or Principle's Name: \_\_\_\_\_

PSAT: verbal \_\_\_\_\_ PSAT math: \_\_\_\_\_

SAT : verbal \_\_\_\_\_ SAT math: \_\_\_\_\_

National Merit Selection: \_\_\_\_\_

Honors & AP Classes \_\_\_\_\_

Cumulative Grade Average \_\_\_\_\_

Class Ranking \_\_\_\_\_

3. Extracurricular Activities & Extent of Participation (include both athletic and non-athletic activities).

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4. Awards and Honors Received:

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5. Colleges & Universities applied for admission (indicate if already accepted)

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6. What studies are you planning to consider as your major.

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7. Describe any other factors you feel qualify you for scholarship aid from The Lewes Yacht Club Foundation.

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I affirm that the above information is accurate to the best of my knowledge.

Signature: \_\_\_\_\_

**RETURN ALL INFORMATION TOGETHER WITH OFFICIAL TRANSCRIPTS AND PERSONAL  
REFERENCES FORMS POSTMARKED NO LATER THAN MARCH 30.  
ALL FORMS TO BE TYPED OR PRINTED LEGIBLY.**



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## RECOMMENDATION FORM for All Scholarship Applicants (*print or type*)

### SECTION I - To be completed by the applicant

Name of Applicant: \_\_\_\_\_

☐ waive

my right to access the information contained in this form.

☐ do not waive

Applicants

Signature: \_\_\_\_\_

### SECTION II - To be completed by an academic instructor, sports coach, or employer.

1. In what capacity and for how long have you known the applicant?

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2. How firm is the applicants commitment to his/her prosed field of study or competition?

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3. How would you rate the applicant in the following areas? Leave blank any area in which you are unable to evaluate the applicant.

	Excellent	Very Good	Average	Below Average
Leadership				
Initiative				
Seriousness of Purpose				
Enthusiasm				
Adaptability				
Maturity				
Emotional Stability				
Public Speaking				
Community Service				



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4. Please cite specific examples of the applicant's demonstration of the above qualities listed in question 3.

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5. Are there any additional comments you feel would be appropriate?

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Name 

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Signed 

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 Date 

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Title or Position 

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Institution 

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Telephone 

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 E-mail 

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