



JUSTIN McCUTCHEON MEMORIAL SCHOLARSHIP APPLICATION

Scholarship Information:

The Justin McCutcheon Memorial Scholarship fund has been established to honor the memory of Justin McCutcheon and to recognize a high school student who is a senior member of a Central Coast Athletic Association (boys' or girls') Golf Team.

Purpose:

The award is intended to help with the student's transition to college and may be used in any fashion the recipient desires. The award will be a one-time award for each applicant. The scholarship is awarded annually.

Award can not exceed NCAA allowable aid limits.

Eligibility:

- ✦ Applicant is currently a Senior attending a High School in San Luis Obispo or northern Santa Barbara County that participates in the Central Coast Athletic Association; and
- ✦ Applicant is member of the Golf Team (boys or girls); and
- ✦ Applicant holds the record for the lowest stroke average in regular season matches in their senior year; and
- ✦ Applicant exemplifies the core values of perseverance, respect and sportsmanship; and
- ✦ Applicant is planning to continue their education at a vocational school, community college or four-year college or university.

Application Deadline - May 03, 2019

All materials must be submitted to the Foundation office by 5:00 pm on May 03, 2019.

No fax or e-mail materials accepted.

The Community Foundation San Luis Obispo County Street Address (for drop-off materials only):

550 Dana Street
San Luis Obispo, CA 93401

Phone Number: (805) 543-2323

HIGH SCHOOL SCHOLARSHIP APPLICATION INSTRUCTIONS

- Central Coast Athletic Association Athletic Director provides an **Application Form** to the qualifying senior student at their high school.
- Student completes the **Application Form** and Signs the **Certification**.
- Student requests the school's Athletic Director or Golf Coach sign the **verification of lowest stroke score average** in regular season matches among senior on the Varsity golf team (boys or girls).¹
- Submit a **Letter of Recommendation**. This could be from a school district employee; someone who has supervised your community service volunteer activities; a sports coach; a city leader; or a faith-based leader. Anyone who will write to why they believe you exemplify the core values of perseverance, respect, and sportsmanship. If possible, please ask the recommender to write a letter on their school or business letterhead. The letter should be placed in a sealed envelope and attached to the student's application. *The recommendation cannot be from a family member. Only one letter will be accepted; therefore, please do not send multiple letters.*
- Write a **Personal Statement/Essay** (maximum 1 typed page) and enclose it with your application. Your essay should demonstrate how you exhibit the core values of perseverance, respect, and sportsmanship in your life. The essay will demonstrate your ability to organize thoughts and express yourself. Grammar, spelling, and clarity of purpose are important.

If possible, please compile all application materials and submit a single application packet. All application materials should be single-sided. Please include your e-mail address on your application as applicants may be notified regarding their application status via e-mail.

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¹ Only one application from a high school should be submitted.

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For Office Use Only

Date Received: _____

- Application/Certification
- Verification of Stroke Average
- Letter of Recommendation
- Personal Statement/Essay

APPLICATION DEADLINE – May 03, 2019

Please submit all materials to the Foundation office by 5:00 pm on May 03, 2019.
No fax or e-mail materials accepted.

READ THE INSTRUCTIONS BEFORE STARTING THIS FORM

Name: _____
(Last, First, Middle Initial)

Permanent Telephone: _____

Cell/Apt/Dorm Telephone: _____

E-mail: _____

Permanent Address:

(all mailings will be sent to permanent address)

Street Address

City, State, Zip Code

Street Address (if same as permanent address, write "same")

City, State, Zip Code

Birthdate: _____

Gender: Male

Female

Marital Status: Single

Married

Separated

Divorced

Widowed

Nearest relative not living with you:

Relationship to you: _____
(Do not list a parent living at your permanent address)

Name

Address

City, State, Zip

Recommendations:

List the name of the individual who will be submitting your required recommendation letter. (Please submit ONLY one letter).

How did you hear about the scholarship?

Please check the Central Coast Athletic Association High School that you attend:

- Arroyo Grande
- Atascadero
- Mission College Prep
- Morro Bay
- Nipomo
- Orcutt Academy
- Paso Robles
- Pioneer Valley
- Righetti
- San Luis Obispo
- Santa Maria
- St. Joseph
- Templeton

Expected Date of College/Vocational School Graduation: _____

Proposed Major: _____
(if you are undecided, please write "undecided" – do not leave blank)

Proposed Career: _____

CERTIFICATION – YOU MUST READ AND SIGN BELOW: *(Application is not valid without signatures)*

I certify that all information submitted in the application materials is true and correct. I agree to provide all statements or documents requested, and I understand that failure to provide these documents will result in termination of my application. I agree that The Community Foundation San Luis Obispo County may forward my name and information from my application to individuals or groups that may be considering me for financial assistance, and for media and public relations purposes.

Applicant's Signature:

Date:

I verify that the above applicant holds the 2018-2019 record for the lowest stroke average in regular season matches among seniors on the Varsity golf team at _____ High School. Stroke Average: _____
(If the player is a girls' team member please double nine-hole score for stroke average.)

Athletic Director or Golf Coach's name

Date:

Athletic Director or Golf Coach's signature

Date: