

NEW YORK STATE AMATEUR HOCKEY ASSOCIATION

2016 Bob Allen Scholarship Application For High School or Prep School Seniors

Bob Allen Scholarships: Four (4) scholarships of \$1000.00 each

Eligibility:

1. Senior in a New York High School, or a New York State resident attending a Prep school
2. New York State Amateur Hockey Association member (past or present)
3. Plan to attend a four-year, two-year, or vocational school full-time (12 credit hours or more).

Guidelines:

1. All Applications must be postmarked prior to April 1, 2016 to Doug Ackley at 926 Shipmaster Court, Annapolis, MD 21401. Application must be typed or printed neatly.
2. Provide three (3) recommendations from people that are not members of your family. Use the forms provided.
3. Submit, sealed high school transcript (3.5 years) with application.

Evaluation Criteria (Points will be awarded for number of years in each activity):

1. Academic status
2. Number of years as a member of NYS Amateur Hockey
3. Scholastic Honors/Awards
4. Curricular and extracurricular activities
5. Positions of leadership held
6. Community related activities
7. Letters of recommendation
8. Applicant essay

ACTIVITIES (list additional on back)

YEARS

(band, chorus, sports teams other than hockey, clubs, jobs, work experience, etc.)

- 1. _____
- 2. _____
- 3. _____
- 4. _____

POSITIONS OF LEADERSHIP HELD

YEARS

- 1. _____
- 2. _____
- 3. _____
- 4. _____

COMMUNITY RELATED ACTIVITIES (list additional on back) **YEARS**

- 1. _____
- 2. _____
- 3. _____
- 4. _____

Please provide a 4 paragraph essay that answers the following:

- 1) What are your short and long term goals for the future? Be as specific as possible.
- 2) Describe your involvement in school and community activities that are not related to hockey, the roles you played in each, and the lessons you learned from them.
- 3) Describe your involvement in hockey, the roles you played in the sport, and the lessons you learned from playing.
- 4) How have the lessons you learned in school/community activities, and hockey prepared you to meet your long and short term goals?

NEW YORK STATE AMATEUR HOCKEY ASSOCIATION

LETTER OF RECOMMENDATION – 2016

Name of Applicant: _____

Recommended By: _____

Occupation/Subject Taught: _____

Relationship to Applicant: _____

Please complete this recommendation form for the applicant who is applying for one of the New York State Amateur Hockey Association scholarships, and return the forms to Doug Ackley at 926 Shipmaster Court, Annapolis MD. 21401, by April 1, 2016. One recommendation must be from a representative in your school district. The other two (make copies of form) are from individuals of your choice.

	HIGHEST			LOWEST	
MOTIVATION	5	4	3	2	1
INITIATIVE	5	4	3	2	1
CONCERN FOR OTHERS	5	4	3	2	1
RESPONSIBILITY	5	4	3	2	1
INTEGRITY	5	4	3	2	1
LEADERSHIP ABILITIES	5	4	3	2	1
PARTICIPATION	5	4	3	2	1

Additional Comments:

Signature

Date