

APPLICATION FOR: CESS Scholarship Awards Program

Dear Athletic Director,

Below you will find an application for the CESS Scholarship Program. You are able to submit either one or two athletes who you feel best fit the criteria below. You will then need to work with that student and his/her parents to determine which sports camp they would like to attend. Please fill in all the information below. Submit this form, receipts and a thank you note from the student, to the CESS treasurer at the fall meeting. Thank you for helping CESS enable our athletes to further their God-given talents.

Criteria

- 1. The athlete has shown a Christ-like attitude by showing sportsmanship both on and off the field/court.
- 2. The athlete has shown a desire to improve his/her skills.
- 3. The athlete's family has shown financial need.
- If none of your athletes fall into category 3, use categories 1 and 2 only

Information

Requesting reimbursement for ____ (number of athletes) reimbursement(s).

First athlete's name:	Name of camp:
Sporting camp cost: \$	
Reimbursement request	: \$
Second athlete's name: _	(if applicable) Name of camp:
Sporting camp cost: \$	
Reimbursement request:	\$
Total reimbursement rec	juest: \$
Each school may request	one of the following: \$200 for one student or \$150 each for two students
Cheque made out to:	(school name)
School Mailing Address:	
Email Sue Kluska at sue	@deltachristianschool.org
Send receipts to:	Sue Kluska
	CESS Treasurer
	c/o Delta Christian School
	4789 - 53rd Street
	Delta, BC V4K 2Y9