



Email applications to Wayne Sutor
Scholarship Committee Chairman
roguevb@hotmail.com

GGBL SCHOLARSHIP APPLICATION

Player Name _____

Email _____ Phone _____

GGBL Team (*applicants must have participated in the league a minimum of 4 years*)

YEAR	TEAM AGE	ASSOCIATION	TEAM NAME	HEAD COACH
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Defensive position played GGBL: _____ High School: _____

Parent or Guardian _____ Email _____

Indicate if parent was a GGBL Park Rep, League Director, or Board Member _____

Player Information

Home Address _____

High School _____ GPA _____ SAT Score _____ ACT Score _____

College, University, or Technical School planning to attend

SCHOOL	DATE APPLIED	DATE ACCEPTED
_____	_____	_____
_____	_____	_____
_____	_____	_____

