



# Holliston Youth Baseball/Softball Association

## 2009 APPLICATION FOR SCHOLARSHIP

Due on or before **May 19, 2009**

*Please type or print legibly in black ink*

### Applicant Information

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Permanent Home Mailing Address:

Street: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian E-Mail: \_\_\_\_\_

### College/university Information

Name of College or University: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Major or course of study: \_\_\_\_\_

Career Objective:  
\_\_\_\_\_

I authorize Holliston High School to release my transcript to HYBSA for this scholarship application.

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*(Signature)*