



# Wyoming Interscholastic Athletic Administrators Association



## SON/DAUGHTER OF A WIAAA MEMBER - SCHOLARSHIP APPLICATION

Applications must be Post Marked No Later than February 29<sup>th</sup>, 2012

Name \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Parent/Guardian \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ Date of Birth \_\_\_\_\_ SSN \_\_\_\_\_

Name of High School \_\_\_\_\_

High School G.P.A. \_\_\_\_\_ ACT Score \_\_\_\_\_ SAT Score \_\_\_\_\_

List sports participated in and number of varsity letters earned \_\_\_\_\_

\_\_\_\_\_

List athletic honors that you have received \_\_\_\_\_

\_\_\_\_\_

List academic honors that you have received \_\_\_\_\_

List service to your community that you have participated in \_\_\_\_\_

\_\_\_\_\_

List service to the WIAAA by your member parent \_\_\_\_\_

\_\_\_\_\_

School You Plan to Attend \_\_\_\_\_

**Attach** \* ONE typewritten page describing your goals, including any additional information than may be helpful,  
\* **ONE letter** of recommendation from any of your high school coaches or teachers.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Nominating WIAAA Member's Signature \_\_\_\_\_ Date \_\_\_\_\_

**SEND TO:**  
**Steve Walker**  
**1703 Hamilton St.**  
**Douglas, WY 82633**