Indiana Golden Gloves, Inc.
Scholarship Questionnaire

Date: _____   Social Security Number: _____

Name: _____
             (Last)   (Middle)   (First)

Address: _____
             (Street)   (City)

_____
             (State)   (Zip code)   (Telephone where you can be reached)

Age: _____   Date of next birthday: _____

Email address: _____

Name and address of both parents:

_____   _____
(Father)   (Mother)

_____   _____
(Street)   (Street)

_____   _____
(City and State)   (City and State)

Name and address of parent or guardian with whom you live:

_____
(Name)   (Address)

Name of school you are presently enrolled and current grade point average. Attach a copy of your most recent grades:

_____

Name of school last attended if not currently in school and final grade point average:

_____

If you are now employed, state the name and address of your employer:

_____
(Name)   (Address)

Provide the name and address of all other employers for whom you have worked for the past year:

_____
(Name)   (Address)

_____
(Name)   (Address)

_____
(Name)   (Address)

_____
(Name)   (Address)

Do you intend to box in the Golden Gloves Tournament?   Yes ____   No ____

If you are awarded a scholarship by the Indiana Golden Gloves, when would you enroll in school?

_____   _____
(Date)   (Where)

Have you and/or your parents applied for financial aid before?   Yes ____   No _____

Do you and/or your parents plan to apply for financial aid before the coming school year?   Yes ____   No _____

I am now boxing for the _____ Club of_____ , and my

coach is _____ .   My coach's telephone number is _____.

_____
(Signature of applicant)

I authorize the principle/dean of _____ High School/College to disclose
my school records to an authorized representative of The Indiana Golden Gloves, Inc.

_____   _____
(Date)   (Signature – Parent or Guardian)

                                                          _____
                                                          (Applicant)

Please return this application to: The Indiana Golden Gloves Scholarship Committee
                                                          6401 Oxbow Way, Indianapolis, IN 46220

If you have any questions, please call Rick Gilbert at (317) 374-4641.

In the space provided below, please provide the committee with a short essay stating what your intended field of study will be in school, what you hope to do once you finish school, and your current grade point average. If you need more space, please feel welcome to attach an additional sheet.

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