

# UNITED ANCHORAGE YOUTH SOCCER LEAGUE

## JAVIER DE LA VEGA SCHOLARSHIP Application for Player Scholarship

Javier de La Vega was highly respected, in our community, for his dedication to the game of soccer, for instilling good sportsmanship and for organizing adult soccer in Anchorage. 2004 marked the 20<sup>th</sup> anniversary of his death. In his honor, his family donated money to begin a scholarship fund through UAYSL. The scholarship was established to help youth in financial need participate in the sport he loved.

Please carefully read and complete this form to apply for a \$250 player financial aid scholarship.

Date of application \_\_\_\_\_ UAYSL Club \_\_\_\_\_

Player Name \_\_\_\_\_

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

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ email \_\_\_\_\_

Phone Number (hm) \_\_\_\_\_ (cell) \_\_\_\_\_

Number of years playing soccer \_\_\_\_\_ Other activities \_\_\_\_\_

Total number of occupants living in household: Children \_\_\_\_\_ Adults \_\_\_\_\_

The following members contribute to the monthly net income of my household:

<u>Name</u>	<u>Employer</u>	<u>Monthly Net Income</u>
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_____	_____	_____
_____	_____	_____
_____	_____	_____

Total Monthly Net Income \_\_\_\_\_

Each UAYSL affiliated club is allocated one \$250 De La Vega player scholarship annually. The completed form will be used by each respective club to determine eligibility based on the player's commitment to soccer and financial need. Applications must be received by the UAYSL Administrator by the following deadlines per session: Fall – Oct. 15 Winter – Jan. 15 Summer – May 15. Scholarships are awarded annually and applications may not be submitted for past years.

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

\_\_\_\_\_  
Date

**\*\*Return your completed form to your team manager, coach or affiliated UAYSL club representative. Players will be notified by their club if they are chosen to receive the De La Vega Scholarship.**