



CSBA Scholarship Application

The Camillus Youth Softball and Baseball Association would like to thank you in advance for applying for our CSBA Scholarship. In an effort to select the most worthy candidates, we ask that you complete the following application. Responses will assist the Selection Committee in getting to know you a little better. Please have your completed application postmarked no later than April 30th and mailed to the following address:

CSBA Scholarship Committee
PO Box 134
Camillus, NY 13031

Applicant Information:

Name: _____

Address: _____

Parent/Guardian Name (1): _____

Parent/Guardian Name (2): _____

Have you enrolled in an accredited higher education program for the upcoming Fall semester? YES NO

If yes, what is the name of the institution? _____

If no, what institutions have you applied to? _____

How many seasons and in which CSBA programs did you participate? (i.e. softball 2012-15):

If applicable, how many years have your parents/guardian been an Active Member of CSBA? (Please list their years and involvement): _____

Grades will be considered in the awarding of the scholarship. Please attach a copy of your transcript.

On a separate page, please submit an essay on the following topic. The essay should not exceed one (1) typed/printed pages.

“The Impact of Community Service on the Youth of Our Community”

CSBA is a community service organization. Be sure to include your responses to the following questions in the content of your essay:

- How did your involvement in CSBA, or other community service organization(s), have a direct influence on you?
- What community volunteer experiences have you had that you feel made a difference in your life or the lives of others?
- In what ways do you think community service will affect your adult life?

Letter of Recommendation

Please include one letter of recommendation from a person of your choice (i.e. parent, coach, teacher, pastor, boss, etc.). The recommendation should include the applicant’s strongest characteristics, and if applicable, cite the applicant’s community involvement.

I authorize the CSBA Scholarship Committee to verify any and all of the information I have supplied in regards to the scholarship application.

Applicant’s Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____