



**VIRGINIA DISTRICT AAU BASKETBALL 2010 SCHOLARSHIP APPLICATION**

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

SEX: (M) (F) DATE OF BIRTH: \_\_\_\_\_ HOME PHONE: (\_\_\_\_) \_\_\_\_\_

HIGH SCHOOL: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: (\_\_\_\_) \_\_\_\_\_

GUIDANCE COUNSELOR: \_\_\_\_\_

HAVE YOU ALREADY BEEN ACCEPTED TO A FOUR YEAR COLLEGE, JUNIOR COLLEGE OR TRADE SCHOOL: \_\_\_\_\_

IF YES, PLEASE LIST THE INSTITUTION NAME: \_\_\_\_\_

WHICH YEAR(s) DID YOU PARTICIPATE: \_\_\_\_\_

WHICH AGE GROUP(s): (14U) (15U) (16U) (17U) (18U) (19U)

WHAT TEAM DID YOU PLAY FOR: \_\_\_\_\_

CITY REPRESENTED: \_\_\_\_\_

COACH'S NAME: \_\_\_\_\_

APPLICANT'S SIGNATURE: \_\_\_\_\_

- PLEASE ENCLOSE THE FOLLOWING WITH THIS APPLICATION:**
- 500 WORD ESSAY
  - LETTER OF RECOMMENDATION FROM HIGH SCHOOL GUIDANCE COUNSELOR
  - COPY OF YOUR HIGH SCHOOL TRANSCRIPT
  - LETTER OF RECOMMENDATION FROM A PERSON NOT RELATED TO YOU

**MAIL APPLICATION AND RELATED MATERIALS TO:**  
JEREMY BULLOCK  
ADMINISTRATIVE CHAIRMAN  
VIRGINIA AAU BOYS' & GIRLS' BASKETBALL  
535 LAUREL AVENUE  
FREDERICKSBURG, VA 22408