



End of Season YSA Stein Eriksen Dare To Dream Scholarship Recipient Report



Applicant's Name:

Today's Date:

Team:

Discipline:

Program Level:

Years on Team:

YSA annual Scholarship Amount (fall and spring totals):

1. Please give a brief explanation of your current training and/or competition level.

2. What were your goals for this past season?

3. What led to your successes this season?

4. What was your most difficult obstacle this season? How did you overcome it?

5. How has participating in your sport changed your life?

6. How did the YSA Stein Eriksen Dare to Dream Scholarship help you reach your goals?

7. How has funding from the YSA Stein Eriksen Dare to Dream Scholarship affected your overall life?

8. Please share any additional information you feel will help the Scholarship Committee understand you, your passions, your sport, and how this funding has affected you.

9. Would you be willing to represent YSA? Check all that apply:

- Allow YSA to use quotes from your scholarship applications
- Speak on radio and/or TV on behalf of YSA, scholarships, and fundraising
- Come to YSA fundraising events
- Speak at YSA fundraising events
- Use your name in publication as a recipient of YSA scholarships

Email this form to admin@ysaparkcity.org at the end of your season