

# Success Beyond the Classroom (SBC) Scholarship Application 2020-2021 School Year

**Application Deadlines:**  
(Marching Band) July 6, 2020  
(Fall) **July 24, 2020**  
(Winter) **October 30, 2020**  
(Spring) **March 5, 2021**

## IMPORTANT INFORMATION

Completed SBC applications must be **delivered** to the athletic director (HS) **or** the assistant principal (MS) **by 3:30 p.m. on or before the deadline date.** The deadline dates for each season are listed above.

SBC applications received **AFTER** the deadline date & time will **NOT** be considered for a scholarship.

**Complete both sides. Do not leave any information blank.**

## SECTION ONE: PARENT/GUARDIAN ONLY

Student Name \_\_\_\_\_

School \_\_\_\_\_ Which Sport or Marching Band? \_\_\_\_\_

Name(s) of Parent(s)/Guardian(s) \_\_\_\_\_

Street Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Home Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_

1. **Father/guardian's employment status?** (Circle One): Full Time Part Time Not Currently Employed

Name of employer: \_\_\_\_\_

**Mother/guardian's employment status?** (Circle One): Full Time Part Time Not Currently Employed

Name of employer: \_\_\_\_\_

2. **Does your student qualify for** (Circle One): Free Lunch Reduced Lunch No Assistance

3. **Family/household size including parents and guardians:** \_\_\_\_\_

4. **During the last school year, how many students in your family/household participated in SWCSD middle school and/or high school extra-curricular activities?** \_\_\_\_\_

5. **Please explain any special circumstances or additional information that SBC should consider when reviewing your scholarship application, include circumstances such as family illness, extraordinary medical expense, job loss, disability, etc. (Do not leave blank.)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Turn over to continue application  
Do not leave any information blank**

Revised:  
06/12/20

**SECTION TWO: STUDENT ONLY**

**6. Please list all school-related activities in which you participated during the past twelve months.**

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**7. How does your participation in sports and/or marching band help you to grow as a student?**

(Attach additional sheet, if necessary)

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**8. Why do you feel you deserve a Success Beyond the Classroom Scholarship?**

(Attach additional sheet, if necessary.)

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**IMPORTANT**

Before submitting this application, please review this form carefully to verify all questions have been answered. **Don't forget to sign below.** SBC Scholarships awarded based on the information you provide on this application. **If any information is left blank, the application will NOT be considered for a scholarship.** Results are determined by SBC then released to the schools approximately one week after the application deadline.

*Please accept the information provided above for consideration of a SBC scholarship.*

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Attention athletic directors (HS) and assistant principals (MS)** All SBC applications turned in to you must be delivered to the DSC by 4:30 p.m. on the deadline date. Applications should be placed in an envelope marked "SBC" and given to the receptionist at DSC.

**SBC** is a 501(c)(3) organization dedicated to assisting students of SWCSD with scholarships to cover a portion of the pay-to-participate fee. SBC holds a fundraiser each year to raise money for these scholarships. If you would like to volunteer at any of the upcoming SBC fundraisers, please contact SBC or notify the athletic director (HS) or the assistant principal (MS) at your school.