

## GLAHA-Bret Artman Memorial Scholarship Fund Application

Player's Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Names of Custodial Parent(s) or Guardian(s):  
\_\_\_\_\_

### List all Sources of Family Income: Attach documentation to support your responses

#### *Employment:*

Father: \_\_\_\_\_ per year

Mother: \_\_\_\_\_ per year

Others: \_\_\_\_\_ per year

(Attach current pay stub or wage statement for each employed family member)

*Previous Year's Gross Income:* \_\_\_\_\_  
(attach copy of tax forms)

#### *Court-ordered payments: (alimony or child support)*

Source: \_\_\_\_\_ Amount: \_\_\_\_\_

Source: \_\_\_\_\_ Amount: \_\_\_\_\_

#### *Any additional income:*

Source: \_\_\_\_\_ Amount: \_\_\_\_\_

Source: \_\_\_\_\_ Amount: \_\_\_\_\_

Source: \_\_\_\_\_ Amount: \_\_\_\_\_

**Funds Requested:**                      **Playing Scholarship**                      **One-Time Assistance**  
(circle one)

Amount Requested: \_\_\_\_\_

## **Accompanying Documentation:**

**If you are applying for a Playing Scholarship, check off all that are included in your application**

\_\_\_\_\_ Current pay stubs or wage statements from all family earners

\_\_\_\_\_ Previous year's tax form that shows gross income

\_\_\_\_\_ Divorce decree and child support or alimony order (if applicable)

\_\_\_\_\_ Written statement from player

\_\_\_\_\_ Written statement from parents

\_\_\_\_\_ Evidence of the child's good character. The following are suggestions:

- letters of recommendation from coaches, teachers, clergy or other mentors
- report cards
- membership in community service organizations

**If you are applying for a One-Time Assistance payment, check all that are included in your application.**

\_\_\_\_\_ Current pay stubs or wage statements from all family earners

\_\_\_\_\_ Previous year's tax form that shows gross income

\_\_\_\_\_ Divorce decree and child support or alimony order (if applicable)

\_\_\_\_\_ A written statement from the player and his/her parent(s)/guardian(s) indicating what is needed, estimated cost and compelling reasons why assistance should be provided

\_\_\_\_\_ Letter of support from the team manager or coach that addresses the child's need for the item(s) requested.

\_\_\_\_\_ Documentation of transaction either in the form of store receipts, credit card statements or copies of cancelled checks. In the event of private purchases, copies of signed checks and statements from both parties of the nature of the purchase and amount must accompany the application.

Mail this form and any accompanying documentation to GLAHA, PO Box 1238, East Lansing, MI 48826-1238. You will be informed of the Board's decision in writing. Before applications can be considered, deposit must be paid.

All decisions of the GLAHA Board of Directors are final.