

John Bieniewicz Memorial College Scholarship 2019 INFORMATION AND REQUIREMENTS

GENERAL INFORMATION TO APPLICANTS:

1. This program of college tuition awards is supported and administered by the Michigan Referee Committee.
2. This year there will be four (4) scholarships of \$2,000.00 each granted to high school seniors who will be graduating in May/June 2019 to be used towards expenses in an accredited college, university, community college, trade or vocational school.
3. This program is opened to current and former soccer referees in the state of Michigan who have officiated matches for a minimum of three (3) years and are graduating high school seniors with a cumulative GPA of at least 2.0.

APPLICATION REQUIREMENTS;

APPLICANT MUST SUBMIT THE FOLLOWING TO THE MICHIGAN REFEREE COMMITTEE % PETE MORRISSEY 20076 RIPPLING LANE NORTHVILLE, MI 48167 AND MUST BE RECEIVED BY MARCH 10, 2019 BY MAIL. NO TEXT OR EMAIL WILL BE ACCEPTED.

1. A copy of completed application form.
2. A copy of your official high school transcript to date.
3. On a separate piece of paper, provide a written essay (approximately 1,000 word or less) addressing:
 - (A) A personal biography including your academic and/or athletics achievements, special interest, organization you belong to, community involvement, places and duties where you may have worked and any award or honorary you have received and course of studies you are going to pursue.
 - (B) Explain the influence referring the game of soccer has had in your life. You may include challenges you have had, difficulties, what you enjoyed and what you found rewarding, how refereeing made you a better person, your future goals in soccer or anything you wish to expand on as it relates to your referee experience.
4. A letter of recommendation from a teacher and/or referee assignor.

JOHN BIENIEWICZ MEMORIAL COLLEGE SCHOLARSHIP APPLICATION

LAST NAME _____ FIRST NAME _____

MAILING ADDRESS _____

CITY _____ ST _____ ZIP CODE _____

HOME PHONE # _____ CELL # _____

EMAIL _____

MALE/FEMALE _____ GPA _____

NAME OF HIGH SCHOOL _____ CITY _____

SOCCER LEAGUES OFFICIATED FOR AND YEARS:

Years

League(Name)

Assignor (Name)

Years	League(Name)	Assignor (Name)

CERTIFICATE: I CERTIFY THAT ALL THE INFORMATION I AM SUBMITTING IS ACCURATE.

Signature _____ Date _____

Mail completed application (MUST BE RECEIVED VIA MAIL BY MARCH 10, 2019) with all requirements to:

MICHIGAN REFEREE COMMITTEE INC.
% Pete Morrissey
20076 Rippling Lane
Northville, MI 48167

