



**United States Basketball Association
College Scholarship Award**

1. Nominee's Full

Name/Address: _____

Please Print or Type (Last) (First) (Middle)

(Street)

(City) (State) (Zip)

2. Birthdate: _____ / _____ / _____
(Month) (Day) (Year)

3. () Female () Male (Check One)

4. Home Telephone: _____ (Include Area Code)

Academic Data

5. High School Attended: _____

Address _____

City/State/Zip _____

School Phone # _____

Principal's Name _____

Grade Point Average: _____ (on a _____ Scale)

SAT Score: _____ ACT Score: _____

Current Year Certified Transcript attached: YES NO (circle one)

Letter of Acceptance from College or University attached: YES NO (circle one)

List current school, civic & community activities: _____

List any academic honors or scholarships you have received: _____

USBA History Data

7. List your complete USBA Youth History Profile below:

Year/Class	Team Name, City & State	Coach's Name

8. Describe your greatest thrill while competing in the USBA.

9. Write a 200 to 300 word essay on how the USBA helps to prepare you for your future college life and adulthood. (Please attach essay to this form)

If you know at this time, please state your intended "major" at college:

10. Have you previously applied for the USBA Scholarship Award? YES NO (circle one)

11. I hereby certify that all the information submitted on this form is true and factual to the best of my knowledge.

Nominee Signature: _____

IMPORTANT: All applications for the USBA Scholarship Award must be received at USBA National Headquarters no later than July 10th of each year. Mail to:

**United States Basketball Association
2275 Captain Waring Court**

Mt. Pleasant, SC 29466

ADMINISTRATIVE USE ONLY

Candidate Qualification Verified By: _____ Date: _____

Candidate Selected: YES NO (circle one)

Notified of Selection/ Non-Selection: _____ Date