



The David Pickeral Memorial Scholarship



Virginia Legacy Soccer Club
109 Bulifants BLVD – Suite A
Williamsburg, VA
www.valegacysoccer.com
Obrien@valegacysoccer.com

Application Form

Personal Information

Name_____

DOB_____

Address_____

Phone_____

Email_____

Team Name_____

Number of Years w/ VLSC_____

Current and Former VLSC Coaches

Colleges/Universities Applied to

College/University You Plan to Attend_____

Address of the FINANCIAL OFFICE where the award will be mailed

Intended Course of Study_____

High School Education Information

High School_____

Class Rank_____

Cumulative GPA_____

Extra Curricular Activities and Community Service
(List in order of importance)

Activity	Position/Award	Total Hours Completed
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

List all academic honors, awards, and achievements earned during high school

Employment Experience	Position	Hrs/Week	Weeks/Yr
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Essay and Attachments

On a separate piece of paper, please write a 200-500 word essay explaining ***what you have learned from participating in a team sport that you will apply to your future as an adult.***

Prove letters or recommendation from two teachers.

Attach a copy of your official high school transcript, a copy of your SAT I scores, and a list of your senior courses.

Have you ever been suspended from high school (in school or out of school)? _____

If yes, please provide a brief explanation.

I hereby certify to the accuracy of the facts and attachments that I have provided in this application.

Signature of Parent or Guardian

Signature of Applicant

Date

Date

**ALL APPLICATIONS AND MATERIALS MUST BE TURN BE
TURNED IN BY FRIDAY, April 25th.**