

Southern Eastern Great Lakes Figure Skating Council Sportsmanship Award

Purpose: To encourage the development of good sportsmanship, strong character, and leadership,

as a role model for fellow skaters.

The Southern Eastern Great Lakes Figure Skating Council (SEGL) awards a \$200.00 scholarship to the council member best exhibiting the following qualities:

* Academic performance * Spirit

Each SEGL member club may submit one candidate per year for consideration. The winner will be announced at the SEGL Annual Meeting and Awards presentation will take place Saturday evening at the close of events.

Application Procedure

- 1. A club representative must submit a letter describing their candidate and how they demonstrate the qualities stated above.
- 2. Include a letter of recommendation from the skater's coach.
- 3. The skater is to submit an essay on what skating means to him/her.

- 4. Complete questionnaire, signed by parent or guardian.
- 5. All applications must be in by December 1.

Criteria

Applicant must be a current registered USFSA member of a SEGL members club in good standing.

Applicant is not required to have competed in SEGL Invitational Competition. However, previous participation may weigh heavily in the selection process.

	ern Great Lakes Figure S	Skating Counc	il	
Sportsmanship		Clu	h	
	USFSA # me			
DOB:				-
Permanent Ad				
Street	City S	State		Zip
Day Phone ()Evening I	Phone()_	Email_	
School Name:				
School Addres	S:			
Street City Please list any level:	State Zip SEGL Invitational Comp	etitions you h	ave skated ir	n stating the year and
• •	ifying competition in whice 8 EGL Juvenile 6th place		ompeted:	
List club volunt	teer hours:			
Activity Hours	per month			
Activity Hours	per month			
Activity Hours	per month			

Highest test passed : Moves in the Field:		Date Passed:			
Freestyle:		Date Passed:			
Dance:	Date Passed:				
Pairs:		Date Passed:			
I attest that the activity, test, and competition information filled out by the applicant is accurate and true to the best of my knowledge.					
•		ent, Secretary, or Treasurer) Date			
Affirmation: Under penalty of forfeiture of any funds that may be awarded under this scholarship, I certify that the information provided is complete and accurate to the best of my knowledge. Applicant's Signature: Date:					
Parent or Legal Guardian S	ignature:	Date			

Please keep a copy and return the original to:
Southern Eastern Great Lakes Council
Sportsmanship Award
Marcia Chaffee
6600 Autumn Glen Drive
West Chester Ohio 45069
tchaf73082@aol.com