

COASTAL CALIFORNIA ZONE TEAM SCHOLARSHIP APPLICATION

FATHER

NAME

STREET ADDRESS

CITY

STATE

ZIP

WORK PHONE

HOME PHONE

CELL PHONE

EMAIL ADDRESS

MOTHER

NAME

STREET ADDRESS

CITY

STATE

ZIP

WORK PHONE

HOME PHONE

CELL PHONE

EMAIL ADDRESS

LIST THE NAMES & AGES OF ALL ZONE TEAM ATHLETES

NAME	GENDER (M/F)	DATE of BIRTH
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1)

2)

3)

4)

What club do you play for (*ex: CHAWP, LAWPC, etc.)

SCHOLARSHIP ELIGIBILITY WORKSHEET

HOW MANY **FAMILY MEMBERS** LIVE IN YOUR HOUSE (INCLUDING YOU)?

WHAT IS YOUR **TOTAL ANNUAL INCOME**? INCLUDE ALL SOURCES

TOTAL ANNUAL INCOME IS FOUND ON YOUR LATEST TAX RETURN:

- ON FORM 1040EZ LOOK FOR **TAXABLE INCOME**
- ON FORM 1040 LOOK FOR **ADJUSTED GROSS INCOME**
- ON FORM 1040a LOOK FOR **ADJUSTED GROSS INCOME**

SIGNATURE

DATE

To qualify for a Coastal California Zone Team scholarship you must **fill out this application** and submit a copy of the first page from your **latest Federal tax return**. Based on this information the Coastal California Zone will calculate whether you are entitled to a scholarship and, if so, how much that scholarship will be.

Fax the completed form and tax returns to: COASTAL CALIFORNIA ZONE SCHOLARSHIPS: 805-687-2401 or email to: scholarship@coastalcalwp.org.