OKLAHOMA COACHES ASSOCIATION SCHOLARSHIP APPLICATION

REGION:	

	he scholarship for which the athlete has been ease fill out another application; one nomina				
	Male Scholar Athlete Scholarship	M	Male Athlete of the Year Scholarship		
	Female Scholar Athlete Scholarship	Fe	emale Athlete of the Year Scholarship		
	Bob R. Williams Scholarship **				
** Applicants	who qualify for the Injured Athlete Scholar	ship are not eligible for	the Bob R. Williams Scholarship.		
region will be at the February scholarship red	A member) must nominate their athlete at the voted on and chosen at the region meetings. Ye region meetings. The Athletes of the Year scipients are chosen at the OCA region meeting must be redeemed within one year.	The Scholar Athlete and Scholarships are chosen	l Bob R. Williams Scholarships are chosen at the April region meetings. All		
Athlete's Name:					
Address:					
City:		St:	Zip:		
Phone: ()				
High School:					
Nominated By	Coach's Name)				
GPA:	ACT Score: _		Rank in Class:		
Honors Receiv	ved:				
Sports Particip	pated In:				
Reasons why t	his student should receive this award:				
	ure this application is filled out completely are for making sure this application contains ac				
	aches Association	Fax Number: (405) 635-9325			
8080 Crystal F		Fmail: lea mouss@oklahomacoaches org			

If an athlete is chosen as a scholarship recipient, he or she will receive confirmation letters and scholarship information in May. All letters will be mailed to the student's home address.

Please make sure all information provided is accurate and complete.