

2009 NVSL SCHOLARSHIP APPLICATION

Name of Applicant: _____

Address _____

E-Mail Address: _____

Name of Parent(s)/Guardian(s): _____

Home Telephone: _____

E-Mail Address: _____

NVSL Team(s) Affiliation: Swim _____

Dive _____

Number of Years: Swim _____ Dive _____

Name of Team Representative: _____

Team Representative Telephone and E-Mail: _____

High School Attended: _____

Plans after high school: _____