# CARLSBAD SON WARNER

### **Football Scholarship Application (Confidential)**

Application, supporting documents & fee due by April 1st.

Player Name:			
Last	First	Middle	
Date of Birth:	Age:	_	
School:		Grade:	
Address:			_
City:	Zip:		
Telephone:()			
Parent /Guardian Name:_			
Parent /Guardian Name:_			
Address (if different than p	layer):		
Parent / Guardian Email:_			
Scholarship Eligibility Does the player's family qualify	for (check all that apply):		
☐ Calfresh, EBT, SNAP F	ood Assistance Progi	ram	
☐ Award letter from HUD			
Any extenuating circumsta	inces?		
that this information is being given information on the application. S	en for the receipt of financ should I provide false infor n. Application submission i	ed on this application is accurate and ial assistance, and that CPW officials mation, CPW has the right to withdraw is not a guarantee of scholarship mone	may verify the
Parent / Legal Guardian (	Print Clearly):		
Signature:		Date:	



### **Football Scholarship Application (Confidential)**

Application, supporting documents & fee due by April 1st.

# Carlsbad Pop Warner Football Scholarship Application (cont.)

#### **Required Documents & Fee**

CPW 2025

\*\*All information provided to CPW will be held in strict confidence\*\*