

**WHS BRIAN PARSONS MEMORIAL SCHOLARSHIP APPLICATION**  
**Must be a Class of 2024 graduating senior WHS Boys or Girls Soccer Player to apply.**

**THIS COMPLETED APPLICATION MUST BE TURNED IN TO MS PATERSON IN GUIDANCE  
BY MARCH 22, 2024.**

**NAME** \_\_\_\_\_

**ADDRESS**  
\_\_\_\_\_  
\_\_\_\_\_

**HOME PHONE** \_\_\_\_\_ **CELL PHONE** \_\_\_\_\_

**PARENT OR LEGAL GUARDIANS' NAMES**  
\_\_\_\_\_

**DATE OF BIRTH.** \_\_\_\_\_

**GPA.** \_\_\_\_\_

**SPORTS PLAYED AND NUMBER OF YEARS/POSITION FOR EACH SPORT**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**\*\*\*ATTACH ONE LETTER OF RECOMMENDATION TO THE BACK OF THIS APPLICATION. THIS RECOMMENDATION SHOULD BE FROM ANY CURRENT OR PREVIOUS HIGH SCHOOL ATHLETIC COACH.**





