

KJM Youth Sports Sponsorship/Scholarship

KEVS Foundation, Inc.

The Kevin J. Major Youth Sports Sponsorship/Scholarship was created in memory of Kevin J. Major. This scholarship/sponsorship is to provide funds to young athletes or their families in financial need, to enable them to participate in structured sports programs.

Eligibility Requirements:

- Applicants must be 19-years old or younger
- Applicants must participate in a structured sports program, i.e. Youth Sport Association, organization, athletic camp or comparable.
- Applicants (or their family) must demonstrate financial need.
- Applicants must be a resident of Western Massachusetts (Hampden, Hampshire, Franklin, Worcester or Berkshire County). Others may be considered.

The KJM Youth Sports Sponsorship/Scholarship is awarded without regard to race, sex, religion, national origin or sexual orientation. KEVS Foundation will not award sponsorship/scholarship to an applicant who is not qualified and reserved the right not to award a sponsorship/scholarship in a given year. Applications that are handwritten must be legible or they will be returned to you and not considered.

Application Process:

1. Print, completely fill out, and return the application and "Assignment of Rights & Consent to Publish" to the address provided below.
2. The KEVS Foundation, Inc. KJM Sponsorship/Scholarship Board will review all applications.
3. The Board will decide on eligibility of the sponsorship/scholarship(s) and notify the applicant of his/her status in a timely manner.
4. If selected the KEVS Foundation, Inc. will make payment directly to the organization on the behalf of the athlete.

Amount of funds you are requesting: \$ _____

Association/Organization that the funds will be provided to: _____

Address to which if selected the funds should be sent to: _____

ADDRESS

EMAIL

WEB

P.O. Box 27 Southampton, MA 01073-0027

KEVSFoundation@gmail.com

www.KEVFoundation.com

KJM Youth Sports Sponsorship/Scholarship

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Application

Athlete Information:

Name: _____ Date: _____

Address: _____

Home/day phone: _____ Cell: _____

E-mail: _____

School Attending: _____

Team/Club Name: _____

Team/Club Address: _____

Coach(s) Name & Contact Information: _____

What other extracurricular activities do you participate in? _____

How did you hear about the KJM Scholarship/Sponsorship? _____

*PLEASE ATTACH AN ESSAY (200-300 WORDS) EXPLAINING WHY YOU SHOULD/WOULD LIKE TO BE CONSIDERED FOR THIS SPONSORSHIP/SCHOLARSHIP. PLEASE DESCRIBE HOW THE FUNDS WILL BE USED SHOULD YOU BE SELECTED. **This statement should be completed by the athlete!** If the athlete is too young to write an essay please advise and the parent should attach their statement of need.

Parent Information:

Parent Name(s): _____

Address: _____

Occupation: _____ Employer: _____

Parent email: _____ Best Contact Phone: _____

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Financial Information:

A. Household Income: (if 2 households please fill out both lines)

Primary Parent Income \$ _____

Secondary Parent Income \$ _____

B. Attach a statement, which best describes your need for financial assistance. i.e. Most recent tax return (with SS# blacked out). Personal financial statement listing income vs. expenses. Documents showing your eligibility for Public Assistance, etc. Should the board require further information, you or your family will be contacted.

I certify that the information provided above is true and represents my true financial need.

This Application is being submitted by: _____
(Print Name)

(Sign & Date)

Mail your application to:

KEVS Foundation, Inc.
P.O. Box 27
Southampton, MA 01073-0027
Attn: KJM Youth Sponsorship/Scholarship

All application will be reviewed in a timely manner and assessed based on need and current funds available.

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ASSIGNMENT OF RIGHTS & CONSENT TO PUBLISH SCHOLARSHIP INFORMATION

KNOWN ALL PERSONS BY THESE PRESENTS:

THAT I, _____/_____ (parent/guardian if under 18-years old), do hereby give KEVS Foundation, Inc. full rights to publish my name/my child's name, where I/we live (city/state, and country only; actual street addresses and phone numbers will NOT be disclosed), my/our pertinent family information, program I/my child am/is participating in, and photographs that I/my child have/has provided or they have taken.

I understand that by execution of this agreement, I am relinquishing my rights to any future compensation for reproduction, publication or use of the above information by the KEVS Foundation, Inc. in its print or electronic correspondence, tournament or on its website.

I hereby specifically waive my/my child's right to review or approve THE MODIFICATION of the above information. (Modifications may be made to accommodate size or content restrictions. Modifications will NOT be made to "distort" or "falsify" any information provided.)

I understand that this Agreement in no way obligates KEVS Foundation, Inc. to publish or use the above-described information.

Executed this _____ day of _____, 20_____ at _____.

By: _____

(Print Name)

(Signature)

Witness: _____

(Print Name)

(Signature)