

High School Roller Hockey League of Long Island

William Orth Memorial Scholarship Award



Scholarships:

Two - **\$500** Scholarships are presented each year. **COMPLETED** applications are due by **March 1st** of the current season in order to be considered.

Eligibility:

Any senior participating in the current HSRHLoLI season with plans on attending a four-year, two-year, or vocational school **full-time** (12 credit hours or more).

Procedure:

1. Completed application must be mailed to **HSRHLoLI, 24 Hillcrest Drive, Smithtown, New York 11787** and postmarked prior to **March 1st**.
2. Submit most recent High School transcript and copy of Report Card showing the first semester marks with the written essay.
3. Provide **three** (3) Letters of Recommendation (using copies of the form provided) from your current or past teachers, instructors, and coaches.

Evaluation Criteria:

Recipients are determined by points awarded for the number of years in each category.

1. Academic Status
2. Number of years as player in the HSRHLoLI organization
3. Scholastic Honors/Awards
4. Curricular and extracurricular activities
5. Positions of leadership held
6. Community related activities
7. Letters of recommendation
8. Applicant essay

High School Roller Hockey League of Long Island

William Orth Memorial Scholarship Award Application Form

Applicant

Name: _____

Address: _____

Telephone: _____

Academic Profile (attach extra paper if needed)

Career Goal/Major: _____

College/Institutions applied/accepted to:

School/Institution	2yr/4yr/other	Accepted (Y/N)	Attending (Y/N)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Seasons Played in HSRHLoLI:

Season	Level
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Scholastic Honors/Awards received:

Honor/Award	Years
_____	_____
_____	_____
_____	_____
_____	_____

Activities: (i.e., band, chorus, other sports teams, clubs, and work experience)

Activities	Years
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Positions of Leadership:

Position	Years
_____	_____
_____	_____
_____	_____
_____	_____

Community Related Activity/Service:

Activity/Service	Years
_____	_____
_____	_____
_____	_____
_____	_____

Written Essay:

Please provide an essay that addresses the following questions.
Please do not exceed 2 typewritten pages.

What are your goals for the future? How have your past experiences (activities, schoolwork, employment, sports, etc.) prepared you to meet these goals?

Be sure to include how your involvement in Roller Hockey has or will help you to meet these goals.

High School Roller Hockey League of Long Island

William Orth Memorial Scholarship Award

Letter of Recommendation

Name of Applicant: _____

Recommended by: _____

Occupation/Subject taught: _____

Relationship to Applicant: _____

Please complete this recommendation form for the applicant referenced above and return this form to **HSRHLofLI, 24 Hillcrest Drive, Smithtown, New York 11787** and postmarked prior to **March 1st**.

ATTRIBUTE	Lowest			Highest		
Motivation	1	2	3	4	5	NA
Initiative	1	2	3	4	5	NA
Concern for Others	1	2	3	4	5	NA
Responsibility	1	2	3	4	5	NA
Integrity	1	2	3	4	5	NA
Leadership	1	2	3	4	5	NA
Sportsmanship	1	2	3	4	5	NA
Participation	1	2	3	4	5	NA

NA – not applicable

Personal Comments: