Spirit Soccer
Coach Education
Scholarship Application

NAME_____TEAM NAME_____AGE U__

ADDRESS_____ZIP_____PHONE_____

FINANCIAL ASSISTANCE REQUESTED FOR:

_____

_____LOCATION OF COURSE_____

TOTAL COST OF COURSE:_____
AMOUNT OF ASSISTANCE REQUESTED:_____
REASON FOR REQUESTING ASSISTANCE_____
_____
_____

I am currently a Spirit/YMCA Coach YES NO
I have coached soccer for _____ years.
My intention is to continue coaching for _____ years.
My intention is TO CONTINUE WITH SPIRIT/YMCA
NOT TO CONTINUE WITH SPIRIT/YMCA

The Spirit Club/YMCA must also benefit from this training. Please describe how this training will benefit you, your team, and how you will contribute to the Spirit Club/YMCA as a whole:
_____
_____
_____
_____
_____

Please feel free to use the back of this sheet if needed.
By Signing this application I agree to:
1. Coach within the Spirit Club for at least 2 full seasons (Fall-Spring) after receiving my License/Diploma .
2. Participate in Player Development Clinics.

If I do not fulfill the above requirements I am responsible to:
1. Pay a fee, decided upon by the Spirit Board of Directors, proportional to the amount of service given to the club after receipt of my License/Diploma, but not greater than the amount of scholarship given me.

Signature_____ Date_____

Process:
1. Application is submitted to the Spirit Office.
2. Approval of funds will be reviewed by the Spirit Board.
3. General range of consideration = 100%

*The Coaches' financial assistance is supported by LSC's annual fundraiser. Spirit Staff and Board review all applications and determine whether to award assistance and how much.