



# CAPITAL DISTRICT MINOR FOOTBALL ASSOCIATION

## CDMFA Football for Life Scholarship

At CDMFA, "Football for Life," is not just a slogan but rather a commitment to all members that as long as you have a passion for the sport of football, there will always be a place for you in the game.

At CDMFA, we are dedicated to nurturing the talents and potential of young athletes through our various programs. The "Football for Life Scholarship" aims to provide financial support to deserving student-athletes who demonstrate exceptional skill, commitment, and leadership on the football field and in the community as a whole.

At the end of the 2024 CDMFA Fall season, the first "Football for Life" scholarship will be awarded to a graduating player who will be continuing their pursuit of football on a High School Team for 2025. CDMFA will pay up to \$500 to the recipient's High School towards the recipient's required team fees for the 2025 season.

### Scholarship Criteria:

- \* must be a member in good standing with a team in CDMFA
- \* must be graduating from a U16 CDMFA club in 2024
- \* must be intending to play High School Football in 2025
- \* this scholarship is valued at \$500, to be paid to your High School team for the first year's football fees .
- \* Application deadline: November 1, 2024 Send submissions to: [cdmfcommunications@gmail.com](mailto:cdmfcommunications@gmail.com)

Full Name: (Last Name) \_\_\_\_\_ (First) \_\_\_\_\_ (Middle Initial) \_\_\_\_\_

Home Address: \_\_\_\_\_ City \_\_\_\_\_ PC: \_\_\_\_\_

Cell Phone:(\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_ Birthdate \_\_\_\_\_

Current Club: \_\_\_\_\_ Head Coach: \_\_\_\_\_

Years Playing Football: \_\_\_\_\_ What Positions have you Played: \_\_\_\_\_

High School You Plan on Attending: \_\_\_\_\_

Name of High School Football Team You Plan on Joining: \_\_\_\_\_

Have you received any other scholarships or financial aid: \_\_\_\_\_

### SIGNATURE – APPLICANT

By signing this application you verify that all of the information is complete and correct and that you authorize CDMFA to contact the office of the High School listed and/or the appropriate personnel of the Football Team listed to confirm enrollment. Personal information is protected under the Alberta Freedom of Information and Protection of Privacy Act and will be kept confidential.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Dated



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## Letter of Reference/Support

A letter of reference/support completed by your Coach or member of your Club's Executive must accompany the scholarship application.

**For the reference person:** This student-athlete is applying for the CDMFA Football for Life Scholarship Award. This award is based not only on athletic prowess in the sport of football but also their commitment to their team, their sport, and their community. The applicant has chosen you as a reference because of your direct knowledge of their abilities, skills and future potential in football. You are encouraged to be frank in describing why the applicant is worthy of this award. Your comments will be treated as confidential. The comments/letter can be a separate document and on letterhead if you wish. Please provide the information below so we may verify information about this applicant if necessary.

- \* name of applicant
- \* name of reference person, team/club, and position, email, phone
- \* relationship to applicant

## Activity Summary

Describe your football related activities, milestones that demonstrate your dedication to football and your commitment to the sport/team both on and off the field.

## Career Objectives/Citizenship

Briefly describe your role as a leader in your football community AND/OR describe your role as a football player in your community at large.

## Personal Statement

A brief statement about your passion for football, your goals, and why you are applying for this scholarship.