

His/Her E-mail address: _____

Graduation Date: _____ **Date of Senior Awards Ceremony:** _____

Name of Golf Team Coach: _____

USGA handicap index or average score for 9 Holes: _____ 18 Holes: _____

Membership in an SJGA affiliated club: _____ Yes _____ No

Name of club: _____

Name of college / university to which you've been accepted and plan to attend: _____

OR

Name of college/university to which you've applied and been wait-listed:

Name your three choices that will be writing your recommendations:

Golf Team Coach _____

Telephone number: (____ __ __) ____ __ __ - ____ __ __

E-mail address _____

******* Guidance Counselor:** _____
(Must be one of three references and stress academics)

Telephone Number: _____

E-mail address: _____

Volunteerism / Community Service Mentor/Leader:

Telephone Number (____ ____ ____) _____ - _____

E -mail address: _____

4th person: (optional)

Telephone Number: (____ ____ ____) _____ - _____

E -mail address _____

DECLARATION: *Must Sign Below*

I attest that all information provided in this application is true and accurate.

Signature

Date

Deadline:
Postmarked no later than Wednesday, April 11th, 2018
Note! No Exceptions