PENNSYLVANIA CAL RIPKEN SCHOLARSHIP APPLICATION

Name _____
Address _____
City/State/Zip _____
Telephone _____
Email _____
Cal Ripken League _____
District # _____
School Attending _____
Graduation Year _____
Grade Point Average _____

In what year(s) did you participate in a Cal Ripken League program?

_____

List all school activities, community involvement and special recognition awards:

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

In at least 100 words please tell us how playing Cal Ripken Baseball has affected your life. (attach additional sheets if necessary):

NOTE: You must be a 12 year old player Cal Ripken Baseball to apply for a Pennsylvania Cal Ripken Scholarship. Legacy Scholarship Players please annotate that in your letter please include the years played.

Please be sure to include a copy of your last report card and two letters of recommendation with the application.

Return to:

Pennsylvania Cal Ripken
c/o Anthony Tucci State Commissioner
341 Washington Street
Birdsboro, PA 19508
Attn: Scholarship Application

Return by Dec 31st 2012