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**Kalman Sarkozy, Sr. Memorial Scholarship Application**

**ABOUT THE SCHOLARSHIP:**

In partnership with the Sarkozy family, The Foundation created a fund to memorialize the accomplishments of community member and soccer legend, Kalman Sarkozy, Sr. The first Kalman Sarkozy, Sr. Scholarship will be awarded in 2020.

**ELIGIBLE CANDIDATES***:*

Graduating seniors from Freedom or Liberty High School who displays leadership, determination, work ethic, dedication, and tenacity.

**QUALIFICATION:**

Awards are available to any Bethlehem Area high school senior from Freedom or Liberty High School who displays the qualities of leadership, determination, tenacity, work ethic, loyalty, and dedication which Coach Sarkozy valued.

**CRITERIA FOR SELECTION:** Students are encouraged to apply on their own behalf or be nominated by Bethlehem Area School District guidance counselor, teacher, coach, principal, teammate, or classmate.

Preference in selection shall be given to members of the boys’ and girls’ Liberty High School soccer teams.

The scholarships award is a check payable to the college or university of those selected to receive the award. The award amount may be either $500 or $1,000.

For consideration of the award, the attached application must be completed in full and submitted by the close of the school day on the date below to the guidance office. The Sarkozy/Barron family, in consultation with the administrative staffs at the high schools, will select the scholarship recipients.

**Kalman Sarkozy, Sr. Memorial Scholarship Application**

Freedom/Liberty HS

**Application Deadline: Thursday, April 2, 2020**

**Student Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Support of Guidance Counselor, Teacher, Coach, or Principal*

Coach Sarkozy valued the qualities of leadership, dedication, tenacity, work ethic, determination, and loyalty. This nominee displays these qualities and characteristics. I believe that this nominee is deserving and exemplifies the qualities and character that Coach Sarkozy embodied, valued, and taught during his life.

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*Printed Name of Supporter Signature of Supporter*

**Attachments:** Please attach the following, which will help us with the award process.

**You should include:**

* Transcript
* Essay – How have you experienced the attributes, qualities, and character embodied in the description of Coach Sarkozy? If applicable, how has soccer impacted your life?
* School activities and academic achievements
* Community service/activities and involvement
* Future plans (include schools you have been accepted to and plans for study)

**References:** Here are the names (and any other helpful contact information) of two people you can contact for further reference (note to nominator – please inform the people you intend to have serve as references). Should not be a family member.

Reference 1: Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reference 2: Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Contact Information:**

Nominee’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ High School:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Telephone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Institution Attending in the Fall:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Bursar # or ID:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date of Application**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Signature of Applicant**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 *All information provided is accurate.*