

## **2020 Sport Clips Scholarship Application**

Sport Clips is awarding up to 20 Cosmetology Students who are enrolled in a Barber or Cosmetology School program, a \$1,000 scholarship.

A selection committee will review all eligible applications. Schools may make as many copies of the application as needed. There is no limit to the number of applicants from a school but there will be no more than two scholarship recipients chosen from an individual school per year for this program. The scholarships will be applied toward tuition and education expenses owed to the school. The check will be made payable to the school on behalf of the student. Scholarship recipient's names and video footage may be used for marketing and promotional purposes as well as use on the web.

Applicants must be in good standing as of the submission date. Applicants must have maintained at least 80% attendance, 80% grade average and demonstrate financial need. The applicant must be enrolled in a cosmetology or barber program and **must have completed at least 50% of the required program hours**. The application must also be verified by a school official.

All fields are required. An incomplete application will automatically be disqualified.

| Date:                                       | Applicants Name:  |                          |                              |
|---|---|--------------------------|------------------------------|
| Address:                                    |   | City:                    | State:Zip:                   |
| Phone:                                      | Email:  |                          |                              |
| Start Date:                                 | Graduation:   |                          |                              |
| Program Required Hours:                     | Completed Hours:  |                          |                              |
| Grade Average:                              | _Attendance Average:  |                          |                              |
| School Name:                                |   |                          |                              |
| Address:                                    |   | City:                    | State:Zip:                   |
| Phone:                                      | Fax:  | Website Address:         |                              |
|   | EDUCATIO  | N                        |                              |
| TYPE OF SCHOOL                              | ADDRESS/CITY  | YEARS<br>COMPLETED       | COURSE OF STUDY              |
| HIGH SCHOOL                                 |   |                          |                              |
| COLLEGE                                     |   |                          |                              |
| VOCATIONAL/ TECH/ TRADE                     |   |                          |                              |
| Please create a video of you instructions). | l<br>answering the following questions ar   | l<br>nd attach to YouTub | e: (Please see next page for |
| 2. Why did you decide to purs               | d be considered for this scholarship<br>sue a career in cosmetology?<br>bitions and where do you see yourse |                          | •                            |
| The following is to be filled out by a      | school official.  |                          |                              |
| I verify that the above information         | ation is true and accurate.   |                          |                              |
| School Official's Name:                     |   |                          |                              |
| Title:                                      |   |                          |                              |
| Signature:                                  |   |                          |                              |

## This is how to upload your video:

- Go to <a href="www.youtube.com">www.youtube.com</a>. If you do not have a YouTube account already, you will need to create one (Google Account). You do not need a Gmail address to have a Google Account; a Google Account may be associated with any active email address.
- When you have created your account, upload your video (no longer than 5 minutes). Be sure to name it with your first and last name and your city and state.
- After uploading your video, click on your video and choose the "Share" button. Choose the email option and email it to <a href="mailto:Contest.Entries@SportClips.com">Contest.Entries@SportClips.com</a> to share it with us.
- We must receive a scanned copy of this completed application attached along with your YouTube video no later than the due date listed for each quarter. You must reapply each quarter. The application is only valid for the quarter in which you apply.
- Incomplete entries will not be eligible.

## For any questions please send all inquiries to <a href="mailto:Contest.Entries@SportClips.com">Contest.Entries@SportClips.com</a>

- Q1- Submit Jan 1 through March 31, 2020
- Q2 Submit April 1<sup>st</sup> through June 30, 2020
- Q3 Submit July 1<sup>st</sup> through September 30, 2020
- Q4 Submit October 1<sup>st</sup> through Dec 31, 2020