2023 Season **Preston Swimmer** Scholarship Application (please print)



Date:			
Name:			
Address:			
Telephone Number:			
Email:			
Date of Birth:		JuniorSenior	Graduate
GPA: Date of Gra	aduation:		
HS Attended or GED acquired:			
College/University/Program you will	l attend:		
Experience as a Dolphin Swimmer: Yrs (list at least three seasons by yea	rs):		
Meets this season (list two minimum	ı):		
Activities you are involved with: (exathletic/academic/service clubs, volu	= =	-	
Honors you have achieved during hig	gh school:		

Signature	Date:
I hereby acknowledge that the information submitted herewith consideration or deferral of consideration is irrevocable.	is true and correct and my election for
 What do you value most from your experience with the What do you hope to improve upon if you have the opp Dolphins in the future? What do you hope to accomplish with the Preston Scho 	portunity to volunteer for the Flying
Please answer one of the following questions:	
Essay: (optional but strongly encouraged, 1000 words or less,	typed)
(You may only be considered once. Therefore, if you will be emay choose NOT to be considered for eligibility this year and a season. If you choose to be considered this season, you CANN	apply for the Preston Scholarship next
Please put your initials in the blank of your choice:	YESNO
I WISH TO BE CONSIDERED ELIGIBLE FOR THE PREST	ON SCHOLARSHIP IN THIS SEASON:

Please return application and supporting materials to secretary@flyingdolphins.org Or you may mail them to: MAFD Secretary, 870 Birch Street, Alcoa TN 37701

Deadline to receive applications is July 21, 2023.