

Due April 12,2024



“MVP” Scholarship

As a part of OSTC’s commitment to the schools covered by our Sports Medicine Team, we are proud to announce the *2024 MVP High School Scholarship*: a \$500 scholarship to be awarded to a senior student athlete who plans on furthering their education.

Eligibility:

- Applicant must be a senior student athlete from the following schools:
 - Burkburnett High School
 - Holliday High School
 - Henrietta High School
- Applicant **must** have a Grade Point Average (GPA) of at least a **3.2** on a 4.0 scale.
- Applicant **must** be a high school senior with plans for furthering education (applicable to college, trade or technical school, certification, etc.).

Application Process:

- Applications must be completed in full and received by April 12,2024. (Please note that applications will not be eligible if they are received after April 12th, *even if they are postmarked before that date.*)
- Student-Athletes who want to apply for the scholarship must submit the following:
 - A completed application form
 - A copy of their high school transcript
 - A personal experience essay
- Essay should be no more than 2 pages, typed and double-spaced with a minimum of 10 pt. font size. Choose one of the following statements below and write an essay describing how personal experiences in your life support the topic you have chosen.
 - Do the right thing for the right reason, the rest will work itself out.
 - Every setback is a setup for a comeback.
 - It is amazing what you can accomplish when you do not care who gets the credit.

Applications will be reviewed by the OSTC Scholarship Committee and winners will be notified by April 26th, 2024.

All applications should be sent to: OSTC Scholarship Committee
(or dropped off) #1 West Medical Court
Wichita Falls, TX, 76310

DUE April 12,2024

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Name _____ Date _____

Home address _____

Phone number _____ Email _____

1. Parent/guardian name _____

Relation _____ Phone Number _____

School Name _____ Expected Date of Graduation _____

Grade Point Average (GPA) _____ Class Rank _____

List of High School Sports/Activities

_____	_____
_____	_____
_____	_____
_____	_____

List of High School Awards/Achievements

_____	_____
_____	_____
_____	_____
_____	_____

References

Please list 3 people we may contact as a reference on your behalf:

1. Name _____ Phone number _____

How does this person know you? _____

2. Name _____ Phone number _____

How does this person know you? _____

3. Name _____ Phone number _____

How does this person know you? _____

By signing below, I certify all information is true and correct to the best of my knowledge. I hereby grant OSTC permission to use my information, story, words, as well as my likeness in a photograph/video in any and all of its publications, including website entries.

Signature _____ Date _____