

## SHS ABC Scholarship Program



The Sickles Athletic Booster Club is proud to offer the **2025–2026 Sickles ABC Senior Scholarship Program**. The application period will close on **April 1, 2026 at 11:59 p.m.**

The Sickles High School Athletic Booster will award **two scholarships** to deserving senior student-athletes. The scholarships will be awarded to those who best exemplify effort, dedication, inclusion, positive attitude, commitment, sportsmanship, and school spirit, regardless of their position on a team. Applicants do not need to be a starter or star player. This scholarship recognizes student-athletes who consistently demonstrate strong character, give their best effort in practices and competitions, support team needs, and encourage fellow teammates.

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### Qualifications to Apply for the ABC Student-Athlete Scholarship

All applicants must:

- Be a **senior student in good standing** at Sickles High School
- Be a **Sickles High School athlete**
- Have a **family member or sponsor who is a Sickles Athletic Booster Club member for the 2025–2026 school year**, or be a member themselves
- Participate in **at least one varsity sport during the 2025–2026 school year** as an athlete or team manager
- Be pursuing **postsecondary education** at a college, university, vocational, or technical school and be able to provide proof of acceptance or enrollment
- **Complete and submit the application in its entirety by the stated deadline**

Late applications will **not** be accepted.

Students receiving **full scholarships** to their selected school are **not eligible** to apply.

Selected applicants will be notified at a scholarship ceremony held at Sickles High School.

If you need to purchase a Sickles Athletic Booster Club membership for the current school year, you may do so at: <https://www.sicklesathleticboosterclub.com/board>



## Sickles Athletic Booster – Athlete Scholarship Application

**Full Name:**

**Grade:**

**Last First**

**M.I.**

**First Period Teacher:**

**Number of Classes:**

**Sports Team(s): Year(s) on Team:**

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**What is your plan after high school?**

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**Please explain why you believe you qualify for this scholarship:**

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### **Disclaimer and Signature**

I certify that all information provided in this application is true and complete to the best of my knowledge.

**Signature:**

**Date:**

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### **Submission Instructions**

Submit a **paper copy** of the completed application in a **sealed envelope** addressed to the **SHS Athletic Booster**. Ask the front office desk to give it to **Ivette Calvo**, or turn it in to her directly. Her office is located in the **main office**.