

CVWOA Scholarship Application

Wrestler Name:

Coach:

High School:

Submitted by:

Wrestler
Picture
Here

Wrestling

- Years in Program:
- Varsity:
- Season Record:
- Career Record:
- Leadership:
- Individual Achievements:

Education

- GPA: _____ on 4.0 / 5.0 scale (circle one)
- Class Rank: _____ of _____ students
- Honors / Awards:
- Extra Curricular Activities:

Community

Financial Need

Other Comments

CVWOA Scholarship forms must be received BEFORE noon on Monday January 30th for consideration.

- Email: scholarship@cvwoa.com
- Fax: 804-789-9146 ~ Attention: Mel Ardis / CVWOA Scholarship
- Mail: Mel Ardis / 8072 Rose Hill Drive / Mechanicsville, VA 23111