



# CAPITAL DISTRICT YOUTH SOCCER LEAGUE SCHOLARSHIP 2022

December 1, 2021

Capital District Youth Soccer League  
19 Aviation Road, Suite 9  
Albany, New York 12205

To Our Graduating Seniors:

Congratulations!! You have worked conscientiously and diligently during these past four years. You and your families should be extremely proud that, in a few short months, you will be reaching an important milestone in life – your High School Graduation.

The Board of Directors of the Capital District Youth Soccer League (CDYSL) have established a scholarship fund for graduating seniors. For high school seniors who are graduating in 2022, the CDYSL will offer four (4) individual scholarships in the amount of \$750.00 each.

If you wish to be considered for a CDYSL scholarship, please read the eligibility requirements and complete the application in its entirety. It is the responsibility of the applicant to forward all required materials, in **one package**, to the Scholarship Committee.

**INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.**

Thank you for your participation in the CDYSL. We hope that your soccer experiences and long-lasting memories on and off of the soccer pitch have been both positive and rewarding. Good luck with your college plans and in all of your future endeavors.

Sincerely,

Candice McHugh  
Chairperson – Scholarship Committee



# CAPITAL DISTRICT YOUTH SOCCER LEAGUE SCHOLARSHIP 2022

## SCHOLARSHIP APPLICATION REQUIREMENTS

### ELIGIBILITY:

To be eligible to apply for a Capital District Youth Soccer League, all applicants must:

1. Be eligible for high school graduation;
2. Plan to attend a two-year or four-year college, university, or vocational school in the fall following graduation;
3. Have participated on a team from a member club of the Capital District Youth Soccer League for at least two (2) seasons; seasons need not be successive, however at least one season must have been in HS junior or senior year;
4. Have been involved in extracurricular school activities and/or community service.

### CHECK LIST:

Before mailing your application, be certain that you have included the following:

1. Application;
2. Two (2) Letters of Recommendation; One (1) must be from your Soccer Coach and One (1) must be from a person who knows you well (i.e. School Guidance Counselor or Administrator, Teacher, Community Service Director, Employer); recommendation from family members will not be accepted;
3. High School Current Transcript of Grades, along with Current SAT/ACT Scores;
4. Brief Resume (high school years only) including awards and achievements, school clubs, employment, community service and volunteer work, etc.;
5. Written essay, 350 to 500 words; the topic of your essay will be:  
*“What has soccer meant to you and what have you learned through participation in the sport?”* **Please note that this is your opportunity to share something about yourself that may give the committee more information to distinguish your application from other similar applications.**

Please write your FULL name on all pages and submit your completed scholarship application, in **one package**, to the CDYSL offices no later than end of business on Tuesday, February 28th of your high school graduation year.

Scholarship Committee  
Capital District Youth Soccer League  
19 Aviation Road, Suite 9  
Albany, New York 12205



## **CAPITAL DISTRICT YOUTH SOCCER LEAGUE**

**APPLICATION DUE CDYSL OFFICES NO LATER THAN END OF BUSINESS  
ON TUESDAY, FEBRUARY 28TH OF YOUR HIGH SCHOOL GRADUATION YEAR**

**DO NOT FAX OR EMAIL APPLICATIONS**

# **APPLICATION**

**FOR**

## **CDYSL SCHOLARSHIP PROGRAM**

**19 AVIATION ROAD  
SUITE 9  
ALBANY, NY 12205**



# APPLICATION

## PART I

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ High School Attended: \_\_\_\_\_

SAT Score: Reading: \_\_\_\_\_ Math: \_\_\_\_\_ Writing: \_\_\_\_\_

ACT Score: Reading: \_\_\_\_\_ Math: \_\_\_\_\_ Composite: \_\_\_\_\_

GPA: Weighted: \_\_\_\_\_ Unweighted: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Mother's Name: \_\_\_\_\_

CDYSL Registered Club for your Junior Year: \_\_\_\_\_ CDYSL Registered Club for your Senior Year: \_\_\_\_\_

**PART II** Two (2) Letters of Recommendations; One (1) must be from your Soccer Coach and One (1) must be from a person who knows you well (i.e. School Guidance Counselor or Administrator, Teacher, Community Service Director, Employer); recommendation from family members will be not accepted;

**PART III** Current transcript and a copy of SAT/ACT scores;

**PART IV** (On a separate sheet of paper) Submit a brief resume (high school years only) including awards and achievements, school clubs, employment, community service and volunteer work, etc.;

**PART V** (On a separate sheet of paper) A 350 to 500-word essay. (Essay topic **“What has soccer meant to you and what have you learned through participation in the sport?”**)

This is your opportunity to share something about yourself that may give the committee more information to distinguish your application from other similar applications.

Application and scholarship information available on [www.cdysl.org](http://www.cdysl.org)