



**Southeastern Massachusetts Baseball  
Umpire Association  
Scholarship Application Form**

Student's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Sex (M or F): \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_  
State/Province: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Are you a U.S. Citizen?: \_\_\_\_\_ If not, are you a permanent resident: \_\_\_\_\_

List the schools you have attended below:

School Name:	Major:	GPA:

What is your cumulative GPA based on a 4.0 weighted scale? \_\_\_\_\_

Please list all the extracurricular activities you participated in (include sports, clubs, etc.)

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Please list all the community service events you participated in (include church activities, food kitchens, tutoring, etc.)

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