

Troy Athens Athletic Booster Foundation Underclassman Enrichment Grant Application

Application Deadline: Monday, April 7, 2025Please print clearly

Applicant's name:					
Last	Firs	First		Grad Year	
Address:					
Street	Apt	City	State	Zip	
Email address (preferred) or pho	one number for any que	estions about th	is application:		
List any parents/guardians/siblin	gs who have earned TA	AAB volunteer p	oints for this a	pplicant:	
Did your family earn a minimum	of 8 points? Yes	_ No			
Did a parent/guardian attend at August and April, this school yea	<u>=</u>		ter meetings, k	oetween	
Is the applicant's grade point ave (No transcript required - Athens couns)		
For concession stand lead parent To qualify you need to have earned a undergraduate grant requirements. Name of lead(s):	minimum of 8 lead points t	his year, in addition			
Sport/varsity club sport(s) played	d:				
Athens coach name (printed):		Sport: _			
Student signature:			Date:		
Parent/guardian signature*: *The underclassman enrichment gran	it check will be made out to	o this adult unless	Date:otherwise specif	ied.	
This section will be completed by T	TAAB Grant/Scholarship	Coordinator			
Guidance office check student's Gl	PA is at least 2.0				