Elizabeth Lee Judo Scholarship

Application Form

Personal Information A. Name:______Date:_____ Address:______or PO Box_____ City:______State:_____Zip:_____ Phone:(______Email (optional) Date of Birth:_____ U.S. Citizen: Yes _____ No Your Rank: _____ Years Judo: ____ USJF Membership Number: ____ Club Name: _____ Instructor's Name: _____ Yudanshakai:_____ Please describe your contribution to local, Yudanshakai, and/or national judo, as a B. student, competitor, official, volunteer, coach, or teacher: Please outline a Judo training plan, e.g., describe your practice, preparation for C. competition, special training or seminars you plan to attend:

D. Please submit an essay, not to exceed one typed or word processed page describing how the money will be used and the benefits you will gain.

E.	Please submit a letter of recommendation from your Judo instructor.	
F. AGREEMENT: I have read and fully understand the eligibility requirements and information requested for the Elizabeth Lee Judo Scholarship and have completed the application truthfully and completely. I fully understand that any misrepresentation of the information contained in this application may result in forfeiture and, if necessary the required repayment of monies received.		
Signat	ure of Applicant	Date
	ormation and supporting documents must be deleted. Your application packet will consist of:	complete in order for your application to be
1.	Application Form	
2.	Essay	
3.	Letter of recommendation from Sensei	
Please	e send completed applications to:	
Elizab	eth Lee Judo Scholarship	
c/o Karen Nagai, Secy		
17212 137 th Ave SE		
Renton, W 98058		
Or electronically to nagaiky@comcast.net		