

Athletic Representative

South Mountain Community College SCHOLARSHIP CONTRACT

Student Name		Student Number	Date	
	accept any scholarship that SMCC may a orfeit my privilege to any award during t		-	
1.	I must register and be actively attending at least twelve (12) credit hour.			
2.	I must achieve a 2.00 grade point average in at least twelve (12) credit hours during the semester			
	immediately proceeding the semester for which the award is to be granted and complete 12 hours			
	during the semester of the award.			
3.	I must participate to the satisfaction of the coach in the activity for which this award is granted.			
4.	I must receive his/her recommendation for a future renewal of the award.			
5.	Any incomplete grade must be removed before the grade point average will be computed.			
6.	I must participate FULLY with the academic tracking program by turning in completed tracking			
	reports three times per semester. **Schedule is posted on the athletic information board.**			
7. I will abide by the code of conduct set forth for athletes of S		et forth for athletes of South	outh Mountain Community College.	
	All Financial	Aid Applicants Please Read and	d Sign:	
sci aid lav	nly those with a lawful presence in the Uncholarships or federal Aid. Any information of scholarships may be subject to mandw. The does not apply to applications for laricopa Community Colleges Foundation	n you provide about your legal si datory reporting to federal immig the private scholarship funds he	tatus when you apply for financial gration authorities under Arizona	
Signature of Scholarship Recipient		Signature of Co	Signature of Coach	
Signature of Athletic Director		S	Signature of Parent or Guardian (Scholarship Recipient under 18 years old)	

I understand that if I do not meet these guidelines any scholarships awarded to me will be withdrawn and a debit card issued for the amount of the scholarship.