Killington Ski Club – Scholarship Fund
2026 – 2027 Season

Killington Ski Club (KSC) has a long history of providing scholarship monies to our athletes and families to assist in the athletes' development in their respective snow sport disciplines. Some of our athletes would not have been able to achieve success and make it to the highest levels of the sport without the financial support of the KSC.
The KSC community of athletes and families provides the charitable donations to make continuing financial support of our athletes possible. The club has been, and always will be committed to the development of our athletes and providing as much financial support as possible to those in need to help them participate in our KSC/KMS Development Programs.

Applicants for scholarship will be evaluated on the following criteria:

1. Financial Need
   The applicant should exhibit a financial need in order to be able to participate on our competitive programs in any discipline including alpine, freestyle, free-ride, and all-mountain or snowboarding.
2. Character
   The applicant should exhibit core values consistent with the KSC code of conduct, and considered by his/her peers, teachers, coaches, and parental community of KSC to be worthy of financial assistance.
3. Academic
   The applicant should exhibit the desire, motivation, work ethic, and intelligence to succeed in his/her academic pursuits and have a strong academic track record.
4. Athletic
   The applicant should exhibit the desire, motivation, and work ethic to achieve his/her goals in the sport and be willing to actively participate in the competitive programs with the focus necessary for personal improvement in the sport.

Information which supports the applicant's request for scholarship such as grade reports, written recommendations from teachers, coaches, or other personal contacts may be included as part of this application. All information supplied as part of the scholarship evaluation process will be held in the strictest confidence and reviewed only by the KSC Scholarship Committee. No information as supplied will be released in any manner written, or verbal to anyone, or any other organization other than the current standing active members of the KSC Scholarship Committee.

KSC Scholarship Committee:

Bryan Hopkins – Chair
Gail Barber and Chuck Hughes

KSC Scholarship Application

Applicant's Name: _____DOB: _____AGE:_____

Applicant Contact Information: (all correspondence will be mailed to this address)
Street: _____
Town/City: _____
State/Zip :_____
Telephone: _____
Email: _____

Was applicant a past participant in KSC/KMS Development Programs?
_____ yes ____ no

What KSC/KMS Development Program is the applicant participating in, or would like to participate in?

_____

Parent or Guardian: _____
Address: _____ Employer: _____
_____ Telephone: _____
Email: _____

Parent or Guardian: _____
Address: _____ Employer: _____
_____ Telephone: _____
Email: _____

Please list other children dependent on parents for support:
_____ Age _____ Relation _____
_____ Age _____ Relation _____
_____ Age _____ Relation _____
_____ Age _____ Relation _____

How many of the children above will be attending tuition-charging institutions this season?

_____

How many of the children above will be participating in KSC/KMS Development Programs this season?

_____

Please explain your circumstances and reason for the scholarship request. Please feel free to note any special family or financial situations you believe merit consideration:

_____
_____
_____
_____
_____
_____
_____
_____

Please list the expenses you expect to incur this season:

Team or Program Fees: _____
Travel: _____
Race license/fees: _____
Equipment: _____
Other: _____

Please list the amount requested:

Amount Requested: _____

Applicant's Certification & Authorization
I declare that the information reported on this form, to the best of my knowledge and belief, is true and complete. I authorize transmittal of this form to the KSC Scholarship Committee and understand that all information provided is strictly **confidential.** If requested by the KSC Scholarship Committee, I agree to send a copy of my latest income tax return or other pertinent financial data for consideration and evaluation of this application for scholarship.
I also understand award recipients are expected to pitch in around the club and assist our Development Program coaches on the hill when home for holidays or break and available.

Signature of parent/guardian: _____ Date: _____
Signature of parent/guardian: _____ Date: _____

Please send the completed application by the <u>10/15/26 deadline</u> to:

Killington Ski Club
Attn: Scholarship Committee – Confidential
PO Box 1066
Killington, VT 05751
Or: Email scanned copy (pdf) to scholarship@killingtonskiclub.com