



2015 Scholarship Program Application

Name: _____

School: Placer Colfax **Class of:** 2016 2017

Phone #: _____

Email Address: _____

	Low			Medium				High		
Current Fitness Level:	1	2	3	4	5	6	7	8	9	10
Current Nutrition Level:	1	2	3	4	5	6	7	8	9	10
Current Energy Level:	1	2	3	4	5	6	7	8	9	10

How often do you exercise or play sports now?: _____

Do you have any health & fitness goals?: _____

What are your plans after High School graduation?: _____

What days & times will you likely come to the Club if you are accepted into the program?: _____

Can you pass a basic physical fitness test?: Yes Maybe Maybe not

Any physical limitations that our staff should be aware of?: No Yes

-If yes, please describe: _____
