



**Kentucky High School Athletic Directors Association
Kentucky High School Coaches Association**

ACADEMIC – ATHLETE SCHOLARSHIP AWARDS PROGRAM

OUTSTANDING MALE ACADEMIC/ATHLETE

Name _____ School _____

Address _____ City _____

Email address _____ Phone _____

Class Rank _____ GPA _____ (weighted/unweighted) ACT _____

ACADEMIC ACHIEVEMENTS

(local, regional, state, and national levels)

Award	Year	Grade Level

ATHLETIC ACHIEVEMENTS

(local, regional, state level(s))

Sport	Honors	Year	Grade Level

SCHOOL AND COMMUNITY SERVICE

Organization/Club	Duty/Responsibility	Year	Grade Level

Counselor Signature _____ Date _____

(Attachments and letters of support may be included)

Please return to: Kathy Johnston, 2019 Oleander Drive, Lexington, KY 40504.

