

2025 Athletes Unlimited Scholarship Award Application

Name: _____

Address: _____

City: _____ ***Zip Code*** _____

Phone #: _____ ***E-mail:*** _____

Date of Birth: _____ ***School:*** _____ ***Grade:*** _____

GPA: _____

Type of impairment/physical limitation/s: _____

Reference Name: _____, ***Phone #:*** _____

Reference Name: _____, ***Phone #:*** _____

Reference Name: _____, ***Phone #:*** _____

******Applicants should complete this form and enclose a typed 1-2 page essay outlining their academic achievements, community involvement and athletic participation along with future plans. Also, please submit a reference letter from two of the three individuals listed above.******

***Please contact Steve Olson at 248.426.9944 X 8 or
contactathletesunlimited@gmail.com with any questions.***