

Miracle League of Arizona College Scholarship Application Form

Specify whether you are applying as an Athlete or Buddy:

Academic Year: Fall, 2025 – Spring, 2026

Deadline for Submission: May 1, 2025

Personal Information

Full Name: _____

Date of Birth (MM/DD/YYYY): _____

Gender: _____

Address: _____

City, State, Zip Code: _____

Phone Number: _____

Email Address: _____

Country of Citizenship: _____

Are you a U.S. citizen or permanent resident? Yes [] No []

If no, please specify your immigration status: _____

Miracle League Information

Number of Years as an Athlete or Buddy: _____

List any Miracle League honors or awards you've received:

- _____
 - _____
 - _____
-

Academic Information

Current High School/College Name: _____

Current Grade Level/Year in College: _____

Intended Major/Field of Study: _____

Name of College/University you plan to attend: _____

GPA (Grade Point Average): _____ (on a scale of _____)

List any relevant honors, awards, or scholarships you've received:

- _____
- _____
- _____
- _____

- _____
- _____

Essay/Statement of Purpose

(Please attach a separate document with your essay, 500 – 1,000 words.)

Essay Question:

Please describe your Miracle League experience, academic goals, career aspirations, and what impact Miracle League has played in those goals and aspirations. Explain how this scholarship will help you achieve your goals and how you plan to make an impact in your community or field of study.

Extracurricular Activities & Volunteer Experience

(Please list any extracurricular activities, leadership roles, or volunteer work that demonstrate your involvement and commitment.)

Activity/Organization: _____

Role/Title: _____

Dates of Participation: _____

Brief Description: _____

Activity/Organization: _____

Role/Title: _____

Dates of Participation: _____

Brief Description: _____

Activity/Organization: _____

Role/Title: _____

Dates of Participation: _____

Brief Description: _____

Activity/Organization: _____

Role/Title: _____

Dates of Participation: _____

Brief Description: _____

Activity/Organization: _____

Role/Title: _____

Dates of Participation: _____

Brief Description: _____

Activity/Organization: _____

Role/Title: _____

Dates of Participation: _____

Brief Description: _____

References

(Please provide two references who can speak to your academic and personal character. Include their contact details.)

Reference 1

Name: _____

Relationship to Applicant: _____

Phone Number: _____

Email Address: _____

Reference 2

Name: _____

Relationship to Applicant: _____

Phone Number: _____

Email Address: _____

Signature and Certification

I certify that the information provided in this application is true and accurate to the best of my knowledge. I understand that providing false information may result in disqualification from the scholarship.

Applicant's Signature: _____**Date:** _____

Submit Completed Application to:

Miracle League of Arizona
Attn: Danielle Downs
11130 E. Cholla St., Ste. I-110
Scottsdale, AZ 85259