

# **The Alex Sebahie Never Back Down Memorial Foundation Scholarship Application**

The Alex Sebahie Never Back Down Memorial Foundation was found in the year 2019 to enhance the foundation wrestling in the state of New Jersey and provide opportunities for students to participate and compete in the sport of wrestling.

**Scholarships up to \$1000.00 per scholarship** are funded annually by The Alex Sebahie Never Back Down Memorial Foundation.

## **Eligibility**

1. Scholarships are limited to New Jersey seniors registered in a college or technical school.
2. Applicant has shown determination for classroom academic achievement.
3. Applicant has shown a dedication to the sport of wrestling in the State of New Jersey.

## **Application Procedure**

Applications may be submitted through [alexsebahie.org](http://alexsebahie.org).

## **PLEASE NOTE:**

### **A Completed Application includes:**

- **Scholarship Application**
- **High School Transcript with GPA**
- **Personal statement about applicant's career aspirations**
- **Personal statement about the impact of the sport of wrestling in their life**
- **2 Letters of Recommendation**

**The Alex Sebahie Never Back Down Memorial Foundation Application  
Student Information**

1. **Full Name:** \_\_\_\_\_

2. **Full Address:** \_\_\_\_\_

3. **Home Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

4. **Email address (optional):** \_\_\_\_\_

5. **Parents'/Guardians' name(s):** \_\_\_\_\_

6. **College/University you plan to attend this fall:** \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number of Financial Aid Office: \_\_\_\_\_

7. **Major:** \_\_\_\_\_

**Minor or area(s) of concentration:** \_\_\_\_\_

8. **ACT or SAT Score:** \_\_\_\_\_

9. **Are you a citizen of the United States?** \_\_\_\_\_

**\* Attach High School transcript with GPA.**

By signing this application, I give permission to the Alex Sebahie Never Back Down Memorial Foundation to publicize my scholarship award if chosen as the recipient.

Applicant's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**The Alex Sebahie Never Back Down Memorial Foundation Application**  
**Student Information**

Provide evidence of your school activity participation, community involvement, achievements, and leadership skills supporting your application:

School Activities: \_\_\_\_\_

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Community Service: \_\_\_\_\_

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Significant honors, awards and accomplishments that you have received: \_\_\_\_\_

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Leadership positions: \_\_\_\_\_

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**The Alex Sebahie Never Back Down Memorial Foundation Application  
(Personal statement about applicant's career aspirations)**

**The Alex Sebahie Never Back Down Memorial Foundation Application  
(Personal statement about the impact wrestling has had on their life)**

**Letter of Recommendation 1**  
**Alex Sebahie Never Back Down Memorial Foundation Application**

Name of Applicant \_\_\_\_\_

The person named above is applying for a Scholarship with the Alex Sebahie Never Back Down Memorial Foundation. A description of the characteristics and abilities of this applicant would provide supplementary information to the Scholarship Committee.

Please briefly explain, how long and in what capacity have you known the applicant?

\_\_\_\_\_  
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\_\_\_\_\_

**PLEASE INDICATE BELOW, ON A SEPARATE SHEET OF PAPER, OR ON THE REVERSE OF THIS FORM, WHY YOU WOULD RECOMMEND THIS PERSON TO BE A DESERVING RECIPIENT OF THE ALEX SEBAHIE NEVER BACK DOWN MEMORIAL FOUNDATION SCHOLARSHIP.**

Signature: \_\_\_\_\_

I can be reached at: phone \_\_\_\_\_ email \_\_\_\_\_

**Letter of Recommendation 2**  
**Alex Sebahie Never Back Down Memorial Foundation Application**

Name of Applicant \_\_\_\_\_

The person named above is applying for a Scholarship with the Alex Sebahie Never Back Down Memorial Foundation. A description of the characteristics and abilities of this applicant would provide supplementary information to the Scholarship Committee.

Please briefly explain, how long and in what capacity have you known the applicant?

\_\_\_\_\_

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\_\_\_\_\_

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**PLEASE INDICATE BELOW, ON A SEPARATE SHEET OF PAPER, OR ON THE REVERSE OF THIS FORM, WHY YOU WOULD RECOMMEND THIS PERSON TO BE A DESERVING RECIPIENT OF THE ALEX SEBAHIE NEVER BACK DOWN MEMORIAL FOUNDATION SCHOLARSHIP.**

Signature: \_\_\_\_\_

I can be reached at: phone \_\_\_\_\_ email \_\_\_\_\_