

Physically Challenged Athletes Scholarship Application Deadline for Submission: May 1

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The Mission of Swim With Mike is:

To provide financial resources for advanced education that paves the way for physically challenged athletes to overcome personal tragedies and realize their full potential.

Swim With Mike is:

An annual fundraising swim-a-thon that generates scholarship funds for physically challenged athletes. Inspired by All-American swimmer, Mike Nyeholt, who was paralyzed in a motorcycle accident, the fund has continually helped other challenged athletes overcome their physical barriers since 1981. By encouraging an active lifestyle and promoting positive self-esteem, the Swim With Mike program hopes to empower its recipients to achieve self-sufficiency while defining and refocusing their lives, and helping them discover what they can accomplish.

Swim With Mike's Roots:

Swim With Mike was founded in 1981 by USC Trojans as a way to help a fellow Trojan in need. Since inception it has been hosted, operated and supported by the University of Southern California.

Scholarship Criteria:

We support college scholarships for athletes who participated in organized competitive youth, high school or collegiate athletics and subsequently have sustained a life changing accident or illness (e.g. paralysis, blindness, cancer, amputation, head injuries). Scholarship recipients will meet the admissions standards at a four year or graduate level institution of higher learning. Following matriculation at the institution, the scholarship recipient shall maintain satisfactory progress towards their degree program and maintain a minimum grade point average of no less than 2.5 cumulative and the minimum required by their department to be considered "in good academic standing". Recipients will provide a copy of their cumulative transcript as well as a letter requesting renewal of their scholarship at the end of each academic year in order to receive aid in subsequent academic years.

The Scholarship Application Process:

Complete scholarship applications must be submitted to Swim With Mike Executive Director Ron Orr prior to the May 1 deadline. The Swim With Mike Board of Directors will meet in June to review new applications as well as renewals. Applicants will be contacted immediately following the Board meeting regarding the status of their application.

Participation Expectations:

Participation in the Swim With Mike Family Association both as a recipient and as an alumni recipient, fundraising and public relations efforts is expected. The scholarship recipients are the lifeblood of this organization and it is anticipated that they will be involved for a lifetime.



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Legal Name				
LAST	FIRST			MIDDLE
Permanent Address				
NUMBER AND STREET				
CITY			STATE	ZIP
PERMANENT PHONE			CELL PHONE	
EMAIL ADDRESS				
If different from the above, please list your ma	ailing address			
NUMBER AND STREET				
CITY			STATE	ZIP
PHONE	DATE OF BI	IRTH		SEX
PLACE OF BIRTH		COUNTRY	OF CITIZENSHIP	
POSSIBLE AREA(S) OF ACADEMIC CONCENTRATION/MAJOR				
ANTICIPATED GRADUATION DATE				
Do you hope to use this scholarship at USC or	other Universi	ty		
Have you sent an admission application to the university of your choice? Yes No				
Have you been accepted? Yes No				
Have you applied for financial aid or other scholarships? Yes No				



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CONDITION OF HEALTH			
DISABILITY			
DATE AND CIRCUMSTANCES OF ONSET OF ACCIDENT OR ILLNESS L	LEADING TO DISABILITY		
LIMITATIONS			
Documentation of disability and condition of health must be submitted with this application	cation.		
Mother's Information	Father's Information		
FULL NAME	FULL NAME		
Home address if different from yours	Home address if different from yours		
STREET	STREET		
CITY STATE ZIP	CITY STATE ZIP		
EMAIL ADDRESS	EMAIL ADDRESS		
PHONE	PHONE		
OCCUPATION	OCCUPATION		
Please check if parents are: Single Married Divorced Separated other			
Please give names and ages of your brothers and sisters. If they have attended college, give the names of institutions attended, degrees and approximate dates:			
Your Marital Status: Single Married Divorced Separated other			
Names and Ages of Your Dependents (if applicable)			



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Education	Intorm	ation

Please list the schools that you have attended, beginning with the most rec	cent. Include the dates of attendance, degree awarded and
cumulative grade point average. Please list all high schools and colleges att	tended

School and Location	Dates of Attendance	Degree (if applicable)	GPA
Scholastic and Academic Honors			
Extracurricular, Personal, and Volunteer Activit	ties (Attach a resume if desired)		
Athletic experience and activities (include dates and and after (if applicable) injury/illness and dates.	l level of participation in organized	sports). Indicate sports participation	on before
EVERA CURRICULA RA A CELIVIENCA AND A COLANIZATION			
EXTRACURRICULAR ACTIVITIES AND ORGANIZATION	5		
HOBBIES AND INTERESTS			
WORK EXPERIENCE			
How did you find out about the Swim With Mike/PC	CASE Scholarship or who recomme	nded that you apply?	
,	2		



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In what ways will you contribute to Swim With Mike and support	ing activities?
AS A RECIPIENT	
AS A GRADUATE OR ALUMNI	
Financial Need Your High School Counselor and/or the Financial Aid Office at your uscholarships or financial aid that may be available to you. The FAFS/ed.gov). The CSS Financial Aid Profile can be found at: (www.colleg	A or Free Application for Student Aid can be found at: (www.fafsa.
TUITION AND FEES	TRANSPORTATION
ROOM AND BOARD (ON CAMPUS)	PERSONAL
BOOKS	TOTAL
TOTAL	
Financial resources available for the academic year	
SCHOLARSHIPS	PARENTS
FINANCIAL AID OR GRANTS	SPOUSE
LOANS	SAVINGS
TOTAL	EARNINGS
	OTHER
	TOTAL
TOTAL ANTICIPATED AMOUNT NEEDED	



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Documents to include with this application:

Personal Statement

This personal statement helps us become acquainted with you as an individual. Please prepare an autobiographical statement with an emphasis on your athletic history and experience, plus your educational goals. Please type this statement and attach it to this application.

Letters of Recommendation

Please attach three letters of recommendation. Two must be from administrators or faculty of the school, which you are currently attending or have recently attended. The third may be from anyone who is not related to you. Please submit the letters with this application. If letters will be sent separate from the application please include the names of those persons that will be sending recommendations on your behalf.

Verification of Disability

Please include written documentation of your disability which includes the onset of accident or illness leading to the disability.

Unofficial Transcript of High School or Previous College Work

Please include a copy of high school, or if applicable all college courses completed and grades.

Current Photograph

Please include a current photograph of yourself which will be used on our website and in public relations materials. A head shot and a full body photo is best. Please do not include other persons in the photo. Digital photos may be sent to info@swimwithmike.org.

Your signature below indicates that all of the information provided on this application is accurate. You agree that the information submitted on this application, including documentation of disability and health condition, may be released to the scholarship committee for determination of award.

Signature	Date
Signature of Legal Guardian (If applicant is under 18 years of age)	Date

Submit to:

Mr. Ron Orr Swim With Mike Founder & Executive Director Heritage Hall MC 0602 Los Angeles, CA 90089-0602 info@swimwithmike.org P 213.740.4155 F 213.740.1306