



North Dakota Cheer Coach Association

www.northdakotacheer.com

Cheer Team Scholar Award Application

Name of School: _____

Cheer Team: _____

Note: Please complete the following if the composite GPA is 3.2 or better on a 4.0 scale for the cheer team listed above. (For fall, use the 1st 9 weeks composite GPAs, for winter use the 2nd 9 weeks GPAs.)

Must be postmarked by November 1, for the fall, and March 20 for the winter. Teams will be recognized at the Fall and Winter Competition.

NAME	YEAR IN SCHOOL	GPA	NAME	YEAR IN SCHOOL	GPA
1.			13.		
2.			14.		
3.			15.		
4.			16.		
5.			17.		
6.			18.		
7.			19.		
8.			20.		
9.			21.		
10.			22.		
11.			23.		
12.			24.		

TOTAL GPA _____ **DIVIDED BY NUMBER OF STUDENTS=** _____ **AVERAGE GPA**

I have reviewed the information presented in this form, and to the best of my knowledge believe it to be true and correct.

Principal: _____

Principal Signature: _____ Date: _____

High School Address: _____

City: _____ State: _____ Zip: _____

Cheer Coach Name: _____

Please return this application to:

Billie Ann Caya, 172 Boise Ave Apt 1, Bismarck, ND 58504
billie_caya@earthlink.net