

**CHRISTOPHER MILLER  
GRANT FUND  
APPLICATION FORM**

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**PERSONAL INFORMATION**

NAME: \_\_\_\_\_ SOCIAL SECURITY NUMBER: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_  
ZIP CODE: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_

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**EDUCATION**

SCHOOL: \_\_\_\_\_ POC: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_  
ZIP CODE: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_  
CURRENT GRADE LEVEL: \_\_\_\_\_ CURRENT GPA: \_\_\_\_\_

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**SOCCER HISTORY**

SOCCER CLUB: \_\_\_\_\_ TEAM: \_\_\_\_\_ YEARS PLAYED: \_\_\_\_\_  
POC: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_  
SOCCER CLUB: \_\_\_\_\_ TEAM: \_\_\_\_\_ YEARS PLAYED: \_\_\_\_\_  
POC: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_  
SOCCER CLUB: \_\_\_\_\_ TEAM: \_\_\_\_\_ YEARS PLAYED: \_\_\_\_\_  
POC: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

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**SOCCER CLUB CONTRIBUTION**

SOCCER CLUB: \_\_\_\_\_ TYPE OF CONTRIBUTION: \_\_\_\_\_  
POC: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_  
SOCCER CLUB: \_\_\_\_\_ TYPE OF CONTRIBUTION: \_\_\_\_\_  
POC: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

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**COMMUNITY SERVICE**

TYPE OF SERVICE: \_\_\_\_\_

POC: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

TYPE OF SERVICE: \_\_\_\_\_

POC: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

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**AUTHORIZATION**

“ I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if awarded the Christopher Miller Grant Fund, falsified statements on this application shall be grounds for repayment of said grant fund monies.

I authorize investigation of all statements contained herein to give the committee any and all information concerning education, soccer history, soccer club contribution and community service, and release the committee from all liability for any damage that may result from utilization of such information.”

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

POC – Point of Contact