

KYLE LEWIS SCHOLARSHIP APPLICATION

APPLICANT NAME: _____

HOME MAILING ADDRESS: _____

APPLICANT'S EMAIL: _____

TELEPHONE NUMBER: _____ APPLICANT GPA: _____

HIGH SCHOOL: _____ CLASSIFICATION: _____

GOLF COACH NAME: _____ PHONE NUMBER: _____

COACH'S EMAIL: _____

SCHOOL ACTIVITIES: (attach an additional page if necessary)

COMMUNITY SERVICE WORK/HOURS: (attach an additional page if necessary)

APPLICANT'S SIGNATURE

DATE

GOLF COACH'S SIGNATURE:

DATE

PLEASE MAIL THIS COMPLETED APPLICATION TO:

OKLAHOMA COACHES ASSOCIATION

Attn: Kyle Lewis Scholarship

8080 Crystal Park Drive

Oklahoma City, OK 73139

The Application Deadline for the Kyle Lewis Scholarship is: MAY 15, 2026