



Gary Dineen Legacy

Gary Dineen Memorial Scholarship Fund Outline

Purpose: To provide needs-based financial assistance to players in the Mass/Conn United organization.

Eligibility: Any player registered with the Connecticut Jr. Huskies, Springfield Jr. Thunderbirds or New England Jr. Falcons.

Awarding of Funds: The awarded funds will be credited to the players account via the Gary Dineen Memorial Scholarship Fund. *The maximum award is 50% of tuition.*

Qualifications: The Gary Dineen Memorial Scholarship Fund committee will consider the following:

- Financial Need
- Academic Record
- Community Service
- The player conducting himself in a manner that contributes positively to the Jr. Falcons organization.

Document Requirements:

- Completed application
- Last two years of Federal income tax returns. (Single joint return for parents, or separate returns for both parents)
- Transcript of the players grades for the last two academic years.
- Short letter (1-2 typed pages) discussing the players' positive characteristics in hockey, academics and the community. The letter should also discuss the basis of the financial need.

The Committee will accept both Early Decision and Regular Decision applications. The Early Decision deadline is 3/17/2017 and the Regular Decision deadline is 4/14/2017.

All complete Early Decision applications will be processed by 3/31/2017, allowing families time to evaluate 2017-'18 tuition obligations prior to the respective team's commitment meeting. Regular Decision applications will be reviewed on a rolling basis with decisions made prior to June 2, 2017. Families applying Regular Decision are expected to pay all required Mass/Conn United obligations during the application process, including commitment fees, monthly tuition payments and equipment package installments.

All applications should be mailed to the following address: Gary Dineen Memorial Scholarship Fund, c/o Robin G. Munson CPA, LLC, P.O. Box 1198, Somers, CT 06071.

You may scan the completed application below to rmunsoncpa@gmail.com. Please email Robin that supporting documents are forthcoming. This will assure that all applications are received and logged.

FAILURE TO SUBMIT AN ENTIRE DOCUMENT PACKAGE MAY AFFECT THE AMOUNT OF YOUR AWARD. YOUR INFORMATION IS REVIEWED ONLY BY AN INDEPENDENT COMMITTEE.



Gary Dineen Legacy

Gary Dineen Memorial Scholarship Fund Application

Player's Name _____

Player's Team for the 2016-'17 Season _____

Number of Years with Program _____

Father/Guardian Name _____

Mother/Guardian Name _____

Home Address _____

Primary Phone Number _____

Secondary Phone Number _____

Primary Email Address _____

Secondary Email Address _____

Please List Two Non-Related References the Committee can Speak to about the Player:

Name _____ Phone Number _____

Name _____ Phone Number _____

I hereby state that I have read and signed this application after its completion, and I swear or affirm that the statements made herein are true and correct, and that all the information provided with this application is true and correct to the best of my knowledge.

(Parent/Guardian Please Sign)

Father/Guardian _____ Date _____

Mother/Guardian _____ Date _____