

# 2023 Mark and Isaac Friday Memorial Scholarship

## Overview

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The Mark and Isaac Friday Memorial Scholarship Foundation (MFMSF), a 501(c)(3) foundation, will be awarding one **(1) \$1,000 scholarship** to a Lake Norman area high school senior who actively participates in tennis and community activities in the Lake Norman area.

The Mark and Isaac Friday Memorial Scholarship was established in 2017 in memory of Mark Friday by his family, friends and USTA tennis teammates. In each of the Foundation's first five years, one new \$1,000 scholarship was awarded, and each expiring scholarship has been renewed. It is the Foundation's expectation that a recipient's \$1,000 scholarship will be renewed for four years as long as scholarship recipients maintain an acceptable GPA and are making progress toward a degree.

**The application deadline is April 15, 2023.**

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### Eligibility

- Lake Norman area high school **senior** planning to attend a 2- or 4-year college or university.
- Currently attending a public or private high school in Charlotte (north of I-85), Concord (northwest of I-85), Cornelius, Davidson, Denver, East Lincoln County, Huntersville, Mooresville, Statesville or Troutman.
- Home-schooled high school seniors in the above footprint are also eligible.

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### Selection Criteria

Winning recipients will be chosen on the basis of the following criteria:

- Active in tennis in one or more of the following ways: Tournament tennis player, high school tennis team participant and/or Jr. Team Tennis.
- A minimum 3.0 GPA.
- Consideration will be given to active participation in Lake Norman community activities and leadership shown both on the tennis court and in the community.
- Financial need is not a consideration for this award.
- Award decisions are made by the Foundation's Scholarship Committee.

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### Award Timeline

|                  |   |
|------------------|---|
| February 1, 2023 | Application period opens to Lake Norman tennis community          |
| April 15, 2023   | All submissions due to MFMSF postmarked by April 15 <sup>th</sup> |
| May 15, 2023     | Recipient announced.  |

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### Questions

Please submit questions to Nancy Friday, the Foundation's Committee Chair, by email at [ncfriday6@gmail.com](mailto:ncfriday6@gmail.com)

# 2023 Mark and Isaac Friday Memorial Scholarship

## Application Submission Instructions

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Thank you for your interest in the *2023 Mark and Isaac Friday Memorial Scholarship*. Please follow the steps below to **fully complete your submission** for the awards.

**All of the items below** must be sent to the Foundation **by mail** and postmarked by **April 15, 2023**. Late or incomplete submissions will not be considered.

**Mark and Isaac Friday Memorial Scholarship  
Foundation Attn: Scott Reynolds  
20619 Bethel Church Rd.  
Cornelius, NC 28031**

In **one envelope**, please submit the following:

- Your completed **2-page Award Application** which should also include your CV if available.
- High school transcript** including GPA and class rank through most recent grading period in a sealed envelope, with the school's stamp across the seal.
- Your **Personal Statement**, one to two pages, typed. Details are provided on the Awards Application.
- Three **Letters of Recommendation**, one from a teacher or coach, and two others from someone who knows you well), each in a sealed envelope, with the recommender's signature across the seal. Use the Recommendation forms included.

High School Transcript and each Letter of Recommendation should be enclosed in an envelope addressed as follows:

Mark and Isaac Friday Memorial Scholarship  
Foundation Attn: Scholarship Committee  
Re: Recommendation for [Your Name]

# 2023 Mark and Isaac Friday Memorial Scholarship

## Application

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### Applicant Information

Name \_\_\_\_\_

Address \_\_\_\_\_  
*street* *City/State/Zip Code*

Home Phone Number \_\_\_\_\_ Cell Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

US Citizen  Yes  No      Gender  Male  Female      Date of Birth \_\_\_\_\_

### Personal Statement

On a separate page(s), please tell us how your participation in tennis, community and education programs has influenced your life. Include examples of special mentors, volunteer service and your future goals. Your personal statement should not focus solely on tennis and should be between one and two typed pages.

### Curriculum Vitae

On a separate page(s), please attach your Curriculum Vitae (CV). If you do not have a CV prepared then please complete the following questions regarding Education Background, Your CV should include the information requested.

***Complete Education and Tennis Participation sections in lieu of CV as needed.***

### Education

High School Name \_\_\_\_\_ Grade \_\_\_\_\_

High School Address \_\_\_\_\_  
*street* *City/State/Zip Code*

Graduation Date \_\_\_\_\_ Cumulative Grade Point Average \_\_\_\_\_

List any honors, awards received during high school\* \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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Extracurricular activities in which you participated\*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Varsity or sports clubs in which you participated\*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Tennis Participation

|   | Number of Years | Skill Level |
|---|-----------------|-------------|
| <input type="checkbox"/> Tennis Tournaments                               | _____           | _____       |
| <input type="checkbox"/> High School Tennis Team                          | _____           | _____       |
| <input type="checkbox"/> Jr Team Tennis Teams                             | _____           | _____       |
| <input type="checkbox"/> Lessons  | _____           | _____       |
| <input type="checkbox"/> Instructor                                       | _____           | _____       |
| <input type="checkbox"/> Tennis Volunteer (discuss in personal statement) | _____           | _____       |
| <input type="checkbox"/> Other _____                                      | _____           | _____       |

Special tennis awards

\_\_\_\_\_

Program/School Name

\_\_\_\_\_

Coach's Name

\_\_\_\_\_

Phone Number

\_\_\_\_\_

Coach's Email Address

\_\_\_\_\_

\*Attach separate page as needed

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### College/University Information

College/University you plan to attend \_\_\_\_\_

Have you been  
accepted:

Yes

No - Please explain plans \_\_\_\_\_

Address of College \_\_\_\_\_

*street*

*City/State/Zip Code*

Entry Date \_\_\_\_\_

2-year program

4-year program

Estimated tuition per year \$ \_\_\_\_\_

### Authorization/Signature

I declare that the information reported on this application, to the best of my knowledge and belief, is true, correct and complete. I understand that the selection of award recipients will be handled by the Mark and Isaac Friday Memorial Scholarship Foundation's Scholarship Committee and have also enclosed my high school transcript as well as three letters of recommendation for their review and consideration.

Applicant's Signature \_\_\_\_\_

Date \_\_\_\_\_

Parent's/Guardian's Signature \_\_\_\_\_

Date \_\_\_\_\_

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**Teacher or Coach's Recommendation.** *The applicant's teacher or coach must complete this form.*

Name of Applicant \_\_\_\_\_

The above student is applying for the *2023 Mark and Isaac Friday Memorial Scholarship*. The primary focus of this award is to help Lake Norman area students who participate in youth tennis by providing college financial assistance. Your honest evaluation of the applicant will help the Mark and Isaac Friday Memorial Scholarship Foundation's Scholarship Committee make an award decision. Please complete the following, and, if possible, attach a letter on behalf of the applicant.

Your Name \_\_\_\_\_

Date \_\_\_\_\_

Position/Title \_\_\_\_\_

Email address \_\_\_\_\_

Name of Program/Facility \_\_\_\_\_

Address \_\_\_\_\_

*Street*

*City/State/Zip Code*

How long and in what capacity have you known the applicant? \_\_\_\_\_

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The following factors are estimates of the candidate's leadership potential. Please rate the applicant's ability in each area in which you have personal knowledge.

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|                         | Most favorable           |                          |                          |                          |                          | Least favorable                    |  |
|-------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|------------------------------------|--|
|                         | 1                        | 2                        | 3                        | 4                        | 5                        |                                    |  |
| Articulate              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Inarticulate                       |  |
| Self-Starter            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Requires constant pushing          |  |
| Exercises good judgment | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Exercises poor judgment            |  |
| Dependable              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Unreliable                         |  |
| Strives for excellence  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Will settle for less than the best |  |
| Leader                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Follower                           |  |

On a separate piece of paper, please indicate any strengths and weaknesses you think the applicant possesses and any other comments you may have.

Date \_\_\_\_\_

Signed \_\_\_\_\_

Thank you for your assistance and effort in completing this recommendation form. **Please return this form directly to the applicant in a sealed envelope with your signature over the seal.** The applicant must return this form to the Foundation's Scholarship Committee in an envelope **postmarked by April 15, 2023.**

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**Recommendation of Applicant's Choice.** *An individual (non-related) of the applicant's choice must complete this form.*

Name of Applicant \_\_\_\_\_

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Your Name \_\_\_\_\_ Date \_\_\_\_\_

Position/Title \_\_\_\_\_ Email address \_\_\_\_\_

Name of School \_\_\_\_\_

Address \_\_\_\_\_

*Street*

*City/State/Zip Code*

How long and in what capacity have you known the applicant? \_\_\_\_\_

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Position/Title \_\_\_\_\_ Email address \_\_\_\_\_

Name of Program/Facility \_\_\_\_\_

Address \_\_\_\_\_

*Street*

*City/State/Zip Code*

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