



2026 CTSC



## SCHOLARSHIP APPLICATION

### Coldbrook Travel Soccer Club Scholarship Program

The Coldbrook Travel Soccer Club (CTSC), formerly known as Bronco Travel Soccer Club (BTSC), is pleased to offer a scholarship program for graduating seniors who have participated in soccer within the CTSC community. For the Class of 2026, CTSC will award four (4) scholarships—two for male athletes and two for female athletes—in the amount of \$250 each. These non-renewable scholarships will be awarded to former CTSC players who will graduate from high school in 2026 and enter an accredited college, university, or technical school (2-year or greater) as a full-time student for the first time in the Fall of 2026.

### Eligibility Requirements:

- Applicant must be a graduating senior in the Class of 2026.
- Must have participated as a rostered player for a minimum of two (2) full seasonal years on a CTSC-registered youth soccer team.
- Must have maintained at least a "B" average through the last seven semesters of high school.
- Must plan to attend a college, university, or technical school (2-year or greater) as a full-time student beginning in Fall 2026.
- Participation in high school or college soccer is **not** required to be eligible.

**Application Process:** Applicants must submit the completed application along with an essay (maximum 350 words). Scholarships will be awarded based on a combination of academic achievement, soccer participation, community service, leadership roles, and the quality of the submitted essay.

**Application Deadline:** Completed applications and essays must be received by **May 15, 2026**.

**Awarding of Scholarships:** Recipients will be announced on the CTSC website and Facebook pages, along with their photos, following graduation. Scholarship funds will be distributed after the recipient provides proof of acceptance into their chosen post-secondary institution. Recipients will also be recognized at their high school graduation.

**Note:** Scholarship recipients will be required to provide their Social Security Number upon acceptance.

**Submit completed applications via email to:**

Lexie Dineen: [lexiedineen5@gmail.com](mailto:lexiedineen5@gmail.com)

If you have questions regarding the application process or scholarship details, please contact Lexie Dineen, [lexiedineen5@gmail.com](mailto:lexiedineen5@gmail.com).



# 2026 CTSC Scholarship Program

Application Form (print or type)  
Application must be received by May 15<sup>th</sup>, 2026

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Parent's names: \_\_\_\_\_

What college / university will you attend this fall: \_\_\_\_\_

Number of participated year(s) in CTSC (formerly BTSC): \_\_\_\_\_

Details of soccer activities, league & teams you have engaged in during your high school years:

1) \_\_\_\_\_ 2) \_\_\_\_\_

3) \_\_\_\_\_ 4) \_\_\_\_\_

5) \_\_\_\_\_ 6) \_\_\_\_\_

Detail Community Services Activities that you have engaged in during your high school years:

1) \_\_\_\_\_ 2) \_\_\_\_\_

3) \_\_\_\_\_ 4) \_\_\_\_\_

5) \_\_\_\_\_ 6) \_\_\_\_\_

Detail Leadership Position that you have held during your high school years:

1) \_\_\_\_\_ 2) \_\_\_\_\_

3) \_\_\_\_\_ 4) \_\_\_\_\_

5) \_\_\_\_\_ 6) \_\_\_\_\_

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Application Form (print or type)

Name: \_\_\_\_\_

## ESSAY

Please attach an essay, maximum 350 words, choosing from one of the two topics:

What were your most memorable moments playing in the CTSC (formerly BTSC) youth travel program and explain how it has influenced your development?

OR

How has the game of soccer positively influenced your life?

**Certification: I certify that all statements and information contained are true and correct, that I have read and understand the requirements of the CTSC Scholarship Program, and that I am eligible to compete for a scholarship.**

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_

The following to be completed by applicants' High school administrator / counselor/ principal

This is to certify that \_\_\_\_\_ has attended \_\_\_\_\_

Located in \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_ and graduated \_\_\_\_\_ or will graduate month/ year \_\_\_\_\_.

Applicant's cumulative GPA \_\_\_\_\_.

I attest that the information provided by me is true and accurate, to the best of my knowledge.

Signature of school administrator / counselor/principal:

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

**Submit completed application and forms to:**

Lexiedineen5@gmail.com