



Supporting Minnesota Skaters since 1991

ADVISORY BOARD

*Janet Carpenter Harris Collins (1946-1996) Tom Darden Dede Disbrow
Ann Eidson Merry Fragomeni Kathleen Gazich Mike Itzin Lexie Kastner
Anne Klein David Lamm Bobby Mecay Herb Morgenthaler Lori Rothmund
David Shulman Bette Snuggerud Matthew Zats (1931-2004)*

2011/2012 HARRIS COLLINS AWARDS
(GENERAL INFORMATION FOR APPLICANTS)

The Harris Collins Awards help skaters whose Home Club is in Minnesota and who are motivated, show promise and love skating, but need financial assistance to continue in our sport. Skaters who fit these guidelines and plan to continue to skate are encouraged to apply for Awards. The Awards are intended for the reimbursement of direct expenses incurred for figure skating education and skill development.

Please read the Application qualification requirements carefully. The qualification requirements are:

- Be an USFS member and be an USFS eligible skater,
- Be recommended by an official from his or her Minnesota Home Club,
- Have financial need (with complete supporting data shown on the Application),
- Have passed the USFS Intermediate Free, Bronze Dance, or Intermediate Pair Test by September 1, 2011,
- Have competed in USFS qualifying competitions detailed on the form, and
- Have your Application postmarked and mailed to Minnesota Skating Scholarship **by January 28, 2012.**

Race, color, creed, sex, religion, and ethnic background are not considered in the selection of recipients. The selection of recipients is made by the Minnesota Skating Scholarship Board of Directors, and the Scholarships are administered through the Minnesota Skating Scholarship Office. The continuation of Awards under this program depends entirely upon the amount of contributions to the Minnesota Skating Scholarship Fund and funds on hand. Awards are for one year only, but Applicants may reapply every year. Other funds available to the Applicant will be considered by the Board.

We look forward to considering your Application and being able to further support Minnesota skaters. For further information, please telephone Herb Morgenthaler at (612) 926-9560, Anne Klein at (952) 906-3358, or Janet Carpenter at (952) 935-0814. The 2012 Harris Collins Award Application is attached and is also posted on the TCFSA website - www.tcfsa.org.

Sincerely,

Herb Morgenthaler, President,
Minnesota Skating Scholarship

*MINNESOTA SKATING SCHOLARSHIP IS A 501(c)(3) CHARITABLE ORGANIZATION
WE APPRECIATE DONATIONS TO SUPPORT MINNESOTA SKATERS*



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2011/2012 HARRIS COLLINS AWARDS
INSTRUCTIONS AND INFORMATION FOR APPLICANTS

1. Application must be postmarked on or before the deadline of January 28, 2012.
2. Application must be filled out completely and legibly to be accepted. Please type or use a pen with dark ink; do not use a pencil.
3. Completion of Part II (Financial Information) must include copies of pages 1 and 2 from Tax Form 1040 most recently filed by Applicant or Applicant's parent[s] or guardian.
4. Application must be signed by either Applicant and/or parent[s]/guardian if they are providing financial support to the applicant. Applicant should sign alone if over 18 years of age and the sole supporter of his/her expenses.
5. A letter of recommendation from Applicant's coach.
6. Future Skating Plans (must be completed by Applicant).
7. Club Officer must send an email or letter to Herb Morgenthaler at herbmn61@usiwireless.com attesting that Applicant is a member in good standing of her/his Club.
8. Submit Application to: Minnesota Skating Scholarship
% Herb Morgenthaler
3851 Beard Ave S.
Minneapolis MN 55410-1040

ALL APPLICATION-RELATED INFORMATION WILL BE KEPT CONFIDENTIAL.



MINNESOTA SKATING SCHOLARSHIP HARRIS COLLINS AWARDS APPLICATION

SKATER: Complete application, send to Minnesota Skating Scholarship Fund,
c/o Herb Morgenthaler, 3851 Beard Ave S., Minneapolis MN 55410-1040

PART I – GENERAL INFORMATION

Applicant Full Name _____ Age _____
LAST FIRST

Home Address _____

City _____ State _____ Zip _____

Phone Number () _____ US Figure Skating # _____

Current Mailing Address _____

City _____ State _____ Zip _____

Phone Number () _____ Email address _____

Minnesota Home Club Affiliation _____ Year Joined _____

Applicant must have her/his Home Club President or Treasurer - or Club Officer send an email to Herb Morgenthaler at Herbmn61@usiwireless.com attesting that the Applicant is a member in good standing of the Club.

Are you a U. S. Citizen? yes no

Are you an eligible person in skating as defined by the US Figure Skating? yes no

Highest US Figure Skating Test Passed: Freeskating _____ Pair _____ Dance _____ Date of last test passed: _____

Qualifying Competitive Record. Name of partner (if applicable) _____

Note! It is not necessary to submit non qualifying competition results.

Upper Great Lakes	Midwestern Sectionals	Junior Nationals	US Figure Skating Championships	Internationals
2012 Level _____ Placement: IR FR _____	2012 Level _____ Placement _____	2012 Level _____ Placement: IR FR _____	2012 Level _____ Placement _____	2012 Level _____ Placement _____
2011 Level _____ Placement: IR FR _____	2011 Level _____ Placement _____	2011 Level _____ Placement: IR FR _____	2011 Level _____ Placement _____	2011 Level _____ Placement _____
2010 Level _____ Placement: IR FR _____	2010 Level _____ Placement _____	2010 Level _____ Placement: IR FR _____	2010 Level _____ Placement _____	2010 Level _____ Placement _____

Current Skating Coach (or coaches) _____

_____ Phone () _____

Coach[es] Email addresses _____

Name and Address of Current School, College or University _____

Please indicate: Full Time Part Time Correspondence Tutoring

Grade Point Average _____ Date of Graduation _____

PART II – FINANCIAL AID INFORMATION

Full Name of ___ Parent or ___ Guardian _____

Home Address – Parent or Guardian _____

Street

Phone Number (_____) _____

City _____

State _____

Zip _____

Father's Name _____

Father's Occupation _____

Employer _____

Mother's Name _____

Mother's Occupation _____

Employer _____

Status of Parents or Guardians

1. Parents' or Guardians' Status: Married Separated Widowed Single Divorced
2. Total number residing in Parents' or Guardians' Household: (include Applicant even if he/she does not live at home, include parents and other dependent children, and other dependents only.)
Number _____ Ages of dependents _____
3. Number of Members of Household (including applicant) who will be in post-high school educational institutions during the current skating year.
Number _____ Cost for this education \$ _____
4. Number of dependents at home attending primary/secondary school or special education.
Number _____ Cost for this education \$ _____
5. The applicant will be living (please check):
at parent's home paying room and board yes no \$ _____ monthly
6. Will applicant own or operate an automobile during the current competition year?
 yes no Monthly operating costs: \$ _____ Insurance \$ _____
7. Please identify other regular monthly payments made by Applicant: _____

8. What were your skating expenses last year?

Ice Time \$ _____ Costumes \$ _____
Equipment \$ _____ Travel for Applicant \$ _____
Coaching Fees \$ _____ Other (explain) \$ _____

Total of Expenses
In Section 8 (skating)
\$ _____
In Section 9 (education)
\$ _____
(add 8 & 9)
\$ _____

9. What were your educational expenses last year?

Tuition \$ _____
Books \$ _____
Tutoring \$ _____

10. Does Applicant work to help with skating expenses? yes no

If yes, please describe type of work _____

Income earned \$ _____

11. List all Applicant's sources of skating support (if none, please indicate so).

Parents \$ _____ Yourself \$ _____ TCFSFA stipend \$ _____
USFS Funds \$ _____ Trust Fund \$ _____ Other \$ _____
MSS Scholarship \$ _____ Club \$ _____ \$ _____

Total Income
\$ _____

Award checks will be sent to either your coach or your club. Indicate to whom award should be sent:

Coach (for coaching fees)

Name _____

Mailing Address _____

Club (for ice fees)

Name _____

Mailing Address _____

Do not forget to enclose a copy of Applicant's most recent Tax Return and that of Applicant's parent or guardian. Include only pages 1 and 2 of tax form #1040. This information is extremely important in making a decision on the award.

CERTIFICATION

We certify that we have read this Application and that it is accurate and complete to the best of our knowledge. We agree to provide, if requested, any other documentation necessary to verify information provided in this form. We further agree to promptly notify the Minnesota Skating Scholarship Fund of any changes in our circumstances.

Applicant _____ Date _____

Father (or guardian) _____ Mother (or guardian) _____

