



The Lou Manzione

Scholarship

Application





**Atlantic Amateur Hockey Association
Scholarship Committee**
C/O Tom Koester, President
P. O. Box 213
Lafayette Hill, PA 19444



Dear Applicant:

It is with great honor that the Atlantic District (AAHA) of USA Hockey has agreed to setup two high school scholarships in the name of Lou Manzione.

Lou was a very important part of our District. Not only was Lou the Vice President of the District for Rules and Regulations for 4 years, but also was President of the New Jersey Youth Hockey League for over 10 years.

In addition to his roles within the Atlantic District and the New Jersey Youth Hockey League, Lou had an active coaching career both at the high school and travel levels. His high school coaching duties included Toms River High School East from 1998 – 2003, and Hudson Catholic High School from 1995-1998. For travel hockey, he coached both at the Brick Hockey Club and for the USA Hockey Festival Program.

Lou gave up many hours of his day to help players of all ages. However, his true passion rested in coaching the high school player, where he hoped not only to impact on-ice development, but more importantly the continuation of the player's education during and after high school.

Lou will not only be missed by his wife of 33 years and his three children, but also by the entire hockey community in the Atlantic District.

The Atlantic Amateur Hockey Association, known as AAHA and the Atlantic District of USA Hockey, is pleased to offer a scholarship program in Lou's name to students who plan to continue their education beyond the 12th grade. A total of two (2) one thousand dollar (\$1,000) scholarships are available, one to a New Jersey High School Senior and the second to a High School Senior from Pennsylvania or Delaware.

**Lou Manzione
1944 - 2003**

Selection Criteria

The applicants must be high school seniors who are registered with USA Hockey.

Selection will be based on applicants essay score, scholastic achievement, coaches recommendation, teacher evaluations and extracurricular activities without regard to race, sex, religion or financial need.

The scholarships are not renewable.

The application form must be accompanied by an essay of 500 words or less on “The Value of High School Hockey to My Personal Development”. It must also be accompanied by the applicant’s high school transcript showing grades, SAT score, GPA and class rank.

Selection of recipients will be the responsibility of the Scholarship Committee.

All selections are final.

Procedure

Students must have their scholarship application, teachers and coaches recommendation postmarked by February 1.

Selection will be made by March 15. Only applicants selected to receive a scholarship will be notified.

Each recipient must respond to his or her acceptance, in writing, by March 30.

Presentation of the scholarship will be made to each recipient at the annual meeting of the Atlantic District.

Before issuance of the monetary awards the recipients will provide a copy of the letter of acceptance to the school they plan to attend.

Note: To help out your coach and teachers and expedite their responses, give them a stamped self-addressed envelope made out to the Scholarship Committee with your name on left hand bottom corner.



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Coaches Recommendation

Players Name _____ High School Name _____

Coaches Name _____ Team: Varsity JV

Coaches Telephone Number: _____

Background Information:

How long have you **coached** this player?

Ratings: Compared to other players you have coached, how would you rate this player?

	Below Average	Average	Good	Very Good	Excellent (top 10%)
Leadership					
Team Work					
Attendance at practice					
Discipline					
Work Habits					
Motivation					

Evaluation: Please write whatever you think is important about this player, include a description of skills and mental attitude. Mention the players' motivation, relative maturity, integrity, originality, intuition, leadership potential, growth, special talents and enthusiasm. Specific information that will help to differentiate this player from others is appreciated.

Signature _____

Date _____



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Teacher Recommendation

Players Name _____

High School Name _____

Teacher's Name _____

Subject Taught _____

Background Information:

How long have you known this student?

Ratings: Compared to other college bound students whom you have taught, check how you would rate this student in terms of academic skills and potential.

	Below Average	Average	Good	Very Good	Excellent (top 10%)
Creativity					
Motivation					
Independence					
Intellectual ability					
Academic achievement					
Written expression of ideas					
Effective class discussions					
Disciplined work habits					

Evaluation: Please write whatever you think is important about this student, including a description of academic and personal characteristics. Mention the candidate's intellectual promise, motivation, relative maturity, integrity, independence, initiative, leadership potential, special talents, and enthusiasm. Specific information that will help to differentiate this student from other's is appreciated.

Signature _____

Date _____



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Teacher Recommendation

Players Name _____

High School Name _____

Teacher's Name _____

Subject Taught _____

Background Information:

How long have you known this student?

Ratings: Compared to other college bound students whom you have taught, check how you would rate this student in terms of academic skills and potential.

	Below Average	Average	Good	Very Good	Excellent (top 10%)
Creativity					
Motivation					
Independence					
Intellectual ability					
Academic achievement					
Written expression of ideas					
Effective class discussions					
Disciplined work habits					

Evaluation: Please write whatever you think is important about this student, including a description of academic and personal characteristics. Mention the candidate's intellectual promise, motivation, relative maturity, integrity, independence, initiative, leadership potential, special talents, and enthusiasm. Specific information that will help to differentiate this student from other's is appreciated.

Signature _____

Date _____



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Application

Date _____

Name _____

Address _____

Telephone Number _____ - _____ - _____

Email Address _____

High School _____

Team Varsity JV

High School Address _____

High School Telephone _____ - _____ - _____

Date of Graduation _____

Teacher Recommendation (2 required)
Have teachers fill out and forward to committee

List any High School Activities & Awards

List any awards or other forms of recognition you have received (sports, community)

List employment held and/or volunteer work you have done

School you plan to attend

Address of school

Have you been accepted? Yes _____ No _____

I understand the selection procedures and acknowledge that any misrepresentation of the facts on this application will be cause for cancellation of the scholarship, if received.

Applicant's Signature

Date

Parent/Guardian's Signature

Date

Mail completed application to:

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