

2026 DIAMOND YOUTH BASEBALL EDUCATIONAL SCHOLARSHIP APPLICATION

Due in our office on or before March 1, 2026

PLEASE PRINT CLEARLY - BLACK or BLUE INK ONLY

Applicant must be a senior in high school and have participated in a **DYB Baseball** (<u>not</u> Softball) program when 12 years old or younger. Applicant's athletic ability will not be a factor in awarding this **educational scholarship**. <u>Please note</u>: NCAA rules may prohibit acceptance of this scholarship if a student will be participating in an athletic program in college. Please check with college prior to applying for this scholarship.

FULL NAME:	Preferred name	
ADDRESS:	CITY:	ST:
ZIP: PHONE: ()	EMAIL:	
PARENT'S NAME:		
PARENT'S PHONE: ()	PARENT'S E-MAIL:	
Number of dependent children in family:	Other scholarships awarded to applicant: \$	
League name where you played DYB Baseball:	City:	ST:
ALL FIVE OF THE BELOW REQUIRED DO	OCUMENTS MUST BE ENCLOSED WITH THIS APPLICA	ATION TO BE ACCEPTED
DO NOT FOLD OR USE STAPLES		
ALL SIGNED DOCUMENTS MUST BE ONE PAGE ONLY		
(1) ACT AND/OR SAT SCORE; CURRENT CLASS SIZE AND RANK (EX: 5/189); GRADE POINT AVERAGE (GPA)		
	D by a school official (principal or counselor) Douges will be accepted – only letters from school of	ficial will be sent to the
(2) EMAIL A DIGITAL PHOTO FOR PUBLICATION		
Head and shoulders, facing forward, no caps/headphones/bats/etc., with a plain background (preferably a blank wall) High quality photos (not blurry) without any watermarks or logos (NO PROOFS!)		
Check here when you have emailed scho	olarships@dybusa.org a High-Resolution Digital Pho	oto – Full name in subject line
(3) SIGNED STATEMENT FROM A LOCAL LEAGUE OFFIC	CIAL, WITH FRANCHISE # AND LEAGUE NAME INCLUDED).
Statement should verify the year(s) the ap	plicant participated in a DYB baseball franchised le	ague.
(4) LETTER FROM THE APPLICANT — ONE PAGE ONLY	— <mark>SIGNED</mark> BY THE APPLICANT	
scholarship, so please do not put an emph	cracurricular activities, and academic achievements. lasis on your athletic achievements. Please include of gain, your athletic abilities will not be a factor in aw	your goals for your degree
(5) LETTER FROM PARENT OR GUARDIAN — ONE PAGE	E ONLY — SIGNED BY PARENT OR GUARDIAN	
State applicant name, financial need, and family circumstances that would benefit from this aid		

A completed application and all required documents must be received at the address below, on or before March 1, 2026:

Johnny Berthelot, Scholarship Committee Chairman DYB, Inc. P.O. Box 1286 Wetumpka, AL 36092