

# Handball Players

2024

## Jim Jacobs Scholarship

In memory of Jim Jacobs, a National Handball Hall of Famer, and philanthropist.

**\$1000**

**Apply Today**

**Application Deadline: September 30, 2024**

**Open to High School Seniors attending college in Fall 2024  
to full-time Second-Year Undergraduate Student**

**You've worked hard in the  
handball community and we want  
to help you wherever you go.**

**Bring your handball  
experience and skills  
with you to college!**

**Submit completed application and supporting documents:**

**via email to [handball@icha.org](mailto:handball@icha.org)  
or mail to:**

**Inner City Handball Association  
P.O.Box 531 Baldwin, NY 11510**





## **Jim Jacobs Scholarship Application**

In memory of Jim Jacobs, a National Handball Hall of Famer, and philanthropist.

### **Applicant Requirements:**

- Inner City Handball Association & United States Handball Association Member
- Open to High School Seniors graduating in Spring 2024 that plan to attend college full-time in the Fall of 2024, up to full-time second-year Undergraduate student
- Age: 17 - 23

### **Scholarship:**

- \$1000

### **Theme:**

We learn things both inside and outside of school. Outside of school, we learn from the people we meet, from the things we do, from the music we hear, from the films we see, and from the books we read.

### **Requirement:**

Create a portfolio using images (photos, video, or digital renderings), audio, or writing to explain lessons you have learned playing handball.

Connect those lessons to ones you have learned elsewhere either in school or out.

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**P.O.Box 531**

**Baldwin, NY 11510**

### **Application Deadline: September 30, 2024**

\*Mailed applications must be postmarked by the deadline date. Incomplete or illegible applications may be disqualified.

Contact us at [handball@icha.org](mailto:handball@icha.org) or call and leave a voicemail at (718)-703-7699.



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\*must complete field

**First Name:\*** \_\_\_\_\_

**Last Name:\*** \_\_\_\_\_

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

**City:\*** \_\_\_\_\_ **State:\*** \_\_\_\_\_ **ZipCode:\*** \_\_\_\_\_

**Contact Number:\*** \_\_\_\_\_

**Email Address:\*** \_\_\_\_\_

**GPA:** \_\_\_\_\_

**Name and Address of High School/College Currently Attending:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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