

Who submits this form. The athlete's current primary coach. Parent or guardian approval is required if the athlete is under 18. Adult athletes approve their own nomination.

Deadline. Monday, November 23, 2026, 11:59 p.m. Email the completed form and any links as one message. Subject line: GEORGE SCHOLARSHIP — [Athlete Last Name]. Address: scholarship@gymnasticsuniversity.com.

What this award is. \$1,000 paid directly to the training gym for the athlete's training tuition or team training fees. Women's Artistic Gymnastics, elite pathway, United States only. Not an NCAA scholarship. One-year award. Video is optional. Tax returns are not requested.

1. Nominating coach

Coach full name

Mobile phone

Email

Gym / training site name

Gym city, state

Your role with this athlete (head coach, primary event coach, other)

Years you have coached this athlete

Gymnastics association and coach membership number (if any)

Coach Safe Sport standing

- ☐ I currently hold USA Gymnastics membership (or equivalent professional membership) in good standing.
- ☐ I have completed current U.S. Center for SafeSport training required for my role.
- ☐ I am not listed on the U.S. Center for SafeSport Centralized Disciplinary Database.
- ☐ I am not listed on a USA Gymnastics Permanently Ineligible or Suspended/Restricted list.
- ☐ I do not have Regular Contact with this athlete in a role that is currently restricted by the Center or USA Gymnastics.

2. Athlete

Athlete full legal name

Preferred name (if different)

Date of birth (MM/DD/YYYY)

Age on November 23, 2026

City and state where the athlete trains

Gymnastics association (e.g., USAG, NGA, other) and athlete membership number

Current competitive stage (select the closest fit)

- ☐ Developmental / compulsory competition
- ☐ Optional / advanced competition
- ☐ Training toward elite competition
- ☐ Elite competition (junior, senior, or equivalent)
- ☐ Other competitive stage (specify below)

Current level / division and designation (use your association's terminology)

Season the athlete began training toward elite (if applicable)

NCAA status during the award period (January 1–December 31, 2027)

- ☐ The athlete will NOT be a varsity NCAA gymnastics student-athlete.
- ☐ The athlete WILL be a varsity NCAA gymnastics student-athlete. (If checked, stop. This award is not available.)

3. Parent / guardian or adult athlete contact

Name

Relationship to athlete

Email

Phone

4. Level and skills mastered

Be specific. List current competition designation and the skills that justify an elite track, by event. Note skills that are trained but not yet competed.

Vault — skills mastered / in progress

Uneven bars — skills mastered / in progress

Balance beam — skills mastered / in progress

Floor exercise — skills mastered / in progress

Additional technical notes (optional):

5. Competition scores and results

List up to five recent, relevant results. Add a line if a planned meet was missed because of cost or injury.

Meet	Date	Level / session	AA or events	Place / notes

Context the committee should know about these results

6. Trajectory — coach narrative

400 words or fewer. Where is this athlete headed in the next 12-24 months? What makes the talent real rather than aspirational? What training would shrink without help? What will \$1,000 protect?

7. Optional video

Up to three unlisted or otherwise limited links. Label each. Video is optional and not required for a complete application.

Link 1 — event, date, what to watch

Link 2

Link 3

8. Simple description of need

Write this with the parent/guardian or adult athlete. Do not attach tax returns, W-2s, or bank statements. Be concrete and brief.

Approximate annual cost of this athlete's elite training (tuition / team fees)

What the family is currently able to cover

Training already reduced or at risk for cost reasons (hours, privates, meets)

High-level circumstances (job loss, medical costs, single income, multiple athletes, relocation, or other — no documents required):

Other aid already received or pending, if any

Confirmation

☐ The parent/guardian or adult athlete has reviewed this need statement and agrees it is fair and accurate.

9. Gym payment information

If selected, Gymnastics University pays the gym, not the family.

Official gym name (payee)

Gym billing contact name

Billing email and phone

Mailing address for payment

10. Attestations and approvals

Coach. I am this athlete’s current primary coach. The facts in this application are true to the best of my knowledge. I understand that selection is competitive, that only one \$1,000 award will be made in 2026, and that funds, if awarded, will be paid to the gym for training fees only. I have the parent/guardian or adult athlete’s approval to submit this nomination.

Coach signature

Printed name and date

Parent / guardian, or athlete 18 or older. I approve this nomination. I understand the award is \$1,000 paid to the gym for training tuition or team training fees, is for one year, is not an NCAA scholarship, and does not require the athlete to appear in Gymnastics University marketing. If selected, I authorize the gym to receive the payment and apply it to this athlete’s training account. I authorize Gymnastics University to announce the athlete’s name, gym, and city if selected. I may withdraw that publicity permission by email within five days of the award notice. I understand Gymnastics University will communicate about this application with me and the nominating coach, not one-on-one with a minor athlete.

Parent/guardian or adult athlete signature

Printed name, relationship, and date

Administrator use only

Date received:

Complete? Y / N

Eligible after screen? Y / N

File number:

Average committee score:

Decision: Recipient / Alternate / No