Cape Cod Soccer Officials Association

Richard E. Maxwell

- MEMORIAL -

Scholarship Award

Cape Cod Soccer Officials Association
Richard E. Maxwell Scholarship Award

- Established 2011 –

The CCSOA is pleased to offer Cape Cod & Islands high school seniors, class of 2027, actively involved (player, student trainer/manager) in their school's 2026 varsity soccer program, an opportunity to enrich their post-secondary education with a cash award.

The award, established in 2011, is named to honor the memory of our fellow official, Richard E. Maxwell. "Max" spent over fifty years officiating soccer, was a CCSOA member for almost forty years and a teacher on the Cape for over twenty years.
His dedication to the sport, fair play and good sportsmanship elevated the game for us all.

Information and award application can be found on the following page.
Additional information can be found at www.capecodsoa.org.

Donations can be sent to the following:
CCSOA/Maxwell Scholarship Fund
Rockland Trust
1195 Falmouth Road
Centerville, MA 02632
-or-
CCSOA/Maxwell Scholarship Fund
CCSOA Scholarship Committee
60 Tar Kiln Road
Orleans, MA 02653

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APPLICATION FOR 2027 AWARD

ELIGIBILITY

For Cape Cod & Islands high school seniors, graduating class of 2027, actively involved (player, student trainer/manager) in their school's 2026 varsity soccer program. CCSOA family members are not eligible. Candidates must submit the following **on or before December 31st, 2026:**

1) Completed application.
2) Two letters of recommendation - i.e., faculty/guidance/coach/advisor/principal
3) Short essay response to the question:
How has participating in high school soccer helped you prepare for your post-secondary education?
4)Mail the completed application along with the two letters of recommendation plus the short essay to:

CCSOA Scholarship Committee
60 Tar Kiln Road
Orleans, MA 02653

SELECTION

Award recipient(s) will be selected by January 31st, 2027, and notified in February. **Only those selected for awards will receive follow-up notification.**

PAYMENT

Award recipient receives payment of the award in the form of a CCSOA check after submitting a transcript of their grades from the first semester of their freshman year, **on or before May 31, 2028.**

APPLICANT NAME:_____ DATE OF BIRTH:_____

ADDRESS:_____ TELEPHONE:_____

CITY:_____STATE:_____Zip_____

E-MAIL ADDRESS:_____

HIGH SCHOOL:_____

FATHER/GUARDIAN NAME:_____MOTHER/GUARDIAN NAME:_____

SCHOOLS APPLIED TO FOR NEXT FALL:_____

_____

HONORS, AWARDS, SCHOOL & NON-SCHOOL ACTIVITIES-(Attach a separate sheet if needed)_____

_____

APPLICANT SIGNATURE:_____DATE_____

PARENT/GUARDIAN SIGNATURE:_____DATE_____

For more information about the Cape Cod Soccer Officials Association - www.capecodsoa.org