



**2026 Carl E. Stotz  
Little League® Scholarship  
Application Form**

**Name**

*(Please print or type)*

**Address**

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Home Phone** \_\_\_\_\_ **Cell Phone** \_\_\_\_\_

**Email**

**Father's Name** \_\_\_\_\_ **Mother's Name** \_\_\_\_\_

**High School**

**Class Rank** \_\_\_\_\_ **SAT/ACT Scores** \_\_\_\_\_

**College/University Attending**

**Guidance Counselor**

*(Name)*

*(Phone)*

**Significant Achievements:** Please include a list of your activities to date including participation in band, chorus, student organizations, school activities, sports, community service and scholastic awards, as well as any current work-related experiences.

**Student Signature**

**Guidance Counselor Signature**

**Please mail, email to [mmarquardt@littleleague.org](mailto:mmarquardt@littleleague.org), or fax the completed Application, Activities List, Letters of Recommendation, and Essay by**

**April 10, 2026 to:**

**Carl E. Stotz Scholarship  
Little League International  
539 US Highway 15  
P.O. Box 3485  
Williamsport, PA 17701-0485  
Fax: 570-326-1074**