

P.O. Box 294 213 Main Street, Suite D Chardon, OH 44024 (440) 285-9050

Please go to chardonchamber.com for a fillable PDF of this application or email mricco@chardonchamber.com to receive a version in Microsoft Word.

Any individual who is a resident of the Chardon Local School District and who has applied to an accredited vocational, two/four year degree-granting institute of post secondary education is eligible to apply for the Chardon Area Chamber of Commerce Scholarship.

**Instructions:** Read and complete all information thoroughly. If there is insufficient space for your answers, please write answers on a separate paper and attach it to the application.

DATE.

NIANAE.

NAIVIE:	DAT	E:
ADDRESS:	CELL PHONE:	
EMAIL ADDRESS:		
PARENTS' NAME(S):		
HIGH SCHOOL:	GRADUATION DATE:	
COLLEGES, UNIVERSITIES OR TRA	DE SCHOOLS YOU HAVE APPLIED TO:	
NAME OF SCHOOL	HAVE YOU BEEN ACCEPTED? (yes, no or don't know)	2 OR FOUR YEAR DEGREE
WHAT MAJOR FIELD OF STUDY A	RE YOU CONSIDERING?	

SPECIAL COURSES: List all Honors and Advanced Placem <u>Course</u>	Grade (9,10,11,12)	<b>Grade/Score</b>
ACTIVITIES: For all that apply, specify the activity and in	dicate during what grade(s) yo	u were involved
Sports:		
Band:		
Service Clubs:		
Honor Societies:		
Other School Activities:		
Church:		
Community Volunteer Work:		
WORK EXPERIENCE: Please list any jobs and the dates yo	ou were employed:	

	ATEMENT: Please provide a statement, between 500 and 600 words, explaining why you ve this scholarship.
The following	information needs to accompany the application:
•	<u>Two</u> letters of recommendations. One can be from a teacher and/or guidance counselor. The other must be from a non-faculty member who is not a relative. Examples include an employer, volunteer coordinator, church group leader or a community leader. Forms are provided with application.
•	<b>Grade Transcript:</b> All applications must be accompanied by a grade transcript covering the applicant's high school years to date. They can be mailed to the Chardon Area Chamber of Commerce, P.O. Box 294, Chardon, OH 44024.
This applicat	ion must be complete and have all required information in order to be processed and considered for scholarships.
ability. I ackn	on contained in this application is true and accurate to the best of my knowledge and owledge the Chardon Area Chamber of Commerce, in its decision making, may seek to all parts of said information; falsification of any information will result in an automation.
Applicant Nam	ne Date eted application, along with all required documents, to mricco@chardonchamber.com
*Email comple	ted application, along with all required documents, to <a href="mailto:mricco@chardonchamber.com">mricco@chardonchamber.com</a>

Application and all additional materials must be postmarked by March 3, 2023.