



**YOUNGSVILLE CHAMBER OF COMMERCE
SCHOLARSHIP APPLICATION FORM**

SCHOOL CURRENTLY ATTENDING: _____

SECTION 1: To be completed by applicant

NAME: _____

MAILING ADDRESS: _____

PHONE NUMBERS: HOME _____ **CELL:** _____

E-MAIL: _____

CONNECTION TO CHAMBER

_____ I am a Chamber member

_____ I am the child of the following chamber member

Chamber Member Business Name: (print) _____

Signature of Chamber Member Representative

Date

NAMES OF PARENTS: _____

High School Attended _____

Post Secondary School Attending _____

Application must include a copy of transcripts/report cards reflecting the last two years of grades and credits.

Planned Major/Course of Study _____

Extra-Curricular School Activities

Please complete in detail. List most recent first. Attach additional sheet if necessary

Organization/Activity	Positions Held	Years Involved	Honors/Awards

School Honors, Awards and Scholastic Achievements



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Please complete in detail. List most recent first. Attach additional sheet if necessary

School	Award or Honor <small>(Give Details)</small>	Organization

Work Experience

Please complete in detail. List most recent first. Attach additional sheet if necessary

Dates	Business	Position	Reason for Leaving	Accomplishments

Section 2

Essay Questions (Response must be typed and be no more than 500 words in length, attached to this application.)

- 1.) Following the completion of your education, how would you be involved in the community and what would you do to improve it?**

- 2.) Why should the Youngsville Chamber of Commerce select you as the recipient of this scholarship?**

Section 3
Recommendation Form (see next three pages for forms)



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Three Recommendation Forms are required for completion of this application packet. The Committee requires that one be from a school instructor, one from a Youngsville Chamber of Commerce member, and one from a community member familiar with your community and extracurricular activities. It is very useful to the people you are references if you provide general information about this scholarship's criteria in written form along with your request to complete the recommendation form.

Be sure to give the person, who is writing a recommendation for you, adequate time to complete the form. The deadline date should be clearly identified by you to the writer when you make your request. You should provide an envelope addressed to the Youngsville Chamber of Commerce and include each sealed recommendation form with your application. It is your responsibility to see that the application is turned in on time and all other material required is included.

Do not open sealed recommendation envelopes.

Authorization for release of records: I hereby authorize the Youngsville Chamber of Commerce to release any information concerning my Academic Transcript and Scholarship Application to the Scholarship Committee and I permit the use of the information in the essay for use in publicity for the Youngsville Chamber of Commerce.

Applicant's Name: (print) _____

Applicant's Signature _____

Date



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Recommendation Form (School Instructor)

PLEASE NOTE: the applicant named below is applying for a scholarship administered by the Youngsville Chamber of Commerce. Your recommendation is needed as part of the application process. **Please return this form to the applicant in a sealed envelope with your signature across the flap so he/she may submit it as part of a complete package.** In addition to completing the form, you may also include a personal letter of recommendation (optional).

Applicant's Name: _____

How long have known this individual? _____

In what capacity have you known this individual? _____

Circle the rating most applicable to the applicant on the following criteria using the scale:

(1) Below Average (2) Average (3) Above Average (4) Excellent (5) Outstanding

Goal Oriented	1	2	3	4	5
Prospect for Personal Success (career/personal)	1	2	3	4	5
Leadership Qualities	1	2	3	4	5
Responsibility/Reliability	1	2	3	4	5
Creativity/Resourcefulness	1	2	3	4	5
Extracurricular Involvement	1	2	3	4	5
Prospects for Academic Success	1	2	3	4	5

Remarks and general information concerning this individual you feel the selection committee should consider when screening this application, please elaborate on information provided. (Attach additional sheet(s) to elaborate.

Name (print)

Relationship to Applicant, if any

Name of Organization/Business

Phone

Signature

Date

Recommendation Form (Chamber Member)

PLEASE NOTE: the applicant named below is applying for a scholarship administered by the Youngsville Chamber of Commerce. Your recommendation is needed as part of the application process. **Please return this form to the applicant in a sealed envelope with your signature across the flap so he/she may submit it as part of a complete package.** In addition to completing the form, you may also include a personal letter of recommendation (optional).

Applicant's Name: _____

How long have known this individual? _____

In what capacity have you known this individual? _____

Circle the rating most applicable to the applicant on the following criteria using the scale:

(1) Below Average (2) Average (3) Above Average (4) Excellent (5) Outstanding

Goal Oriented	1	2	3	4	5
Prospect for Personal Success (career/personal)	1	2	3	4	5
Leadership Qualities	1	2	3	4	5
Responsibility/Reliability	1	2	3	4	5
Creativity/Resourcefulness	1	2	3	4	5
Extracurricular Involvement	1	2	3	4	5
Prospects for Academic Success	1	2	3	4	5

Remarks and general information concerning this individual you feel the selection committee should consider when screening this application, please elaborate on information provided. (Attach additional sheet(s) to elaborate.

Name (print)

Relationship to Applicant, if any

Name of Organization/Business

Phone

Signature

Date

Recommendation Form (Community Member)

PLEASE NOTE: the applicant named below is applying for a scholarship administered by the Youngsville Chamber of Commerce. Your recommendation is needed as part of the application process. **Please return this form to the applicant in a sealed envelope with your signature across the flap so he/she may submit it as part of a complete package.** In addition to completing the form, you may also include a personal letter of recommendation (optional).

Applicant's Name: _____

How long have known this individual? _____

In what capacity have you known this individual? _____

Circle the rating most applicable to the applicant on the following criteria using the scale:

(1) Below Average (2) Average (3) Above Average (4) Excellent (5) Outstanding

Goal Oriented	1	2	3	4	5
Prospect for Personal Success (career/personal)	1	2	3	4	5
Leadership Qualities	1	2	3	4	5
Responsibility/Reliability	1	2	3	4	5
Creativity/Resourcefulness	1	2	3	4	5
Extracurricular Involvement	1	2	3	4	5
Prospects for Academic Success	1	2	3	4	5

Remarks and general information concerning this individual you feel the selection committee should consider when screening this application, please elaborate on information provided. (Attach additional sheet(s) to elaborate.

Name (print)

Relationship to Applicant, if any

Name of Organization/Business

Phone

Signature

Date