

Twinsburg Chamber of Commerce
2017 SCHOLARSHIP APPLICATION

The Twinsburg Chamber of Commerce is pleased to announce that it will be awarding one \$1,000 scholarship to a graduating senior residing in the Twinsburg City School District and enrolled at Twinsburg High School or Cuyahoga Valley Career Center who is planning to further his/her education through an accredited institute/program after graduation.

The decision of the Chamber's Selection Committee is final and will be based on the following criteria: student desire/goals, GPA, school activities, outside interests and community/volunteer activities, as well as one teacher and one civic/religious/volunteer advisor recommendation.

The scholarship money awarded is to be used for a course of study, tuition or books at an accredited college/university/program. Proof of enrollment will be required prior to disbursement of funds. The scholarship is valid for the 2017-18 school year and is not renewable.

To be considered for a scholarship, you must submit the following information:

- A completed **Application Form** signed by you and your parents/guardian.
 - A signed **Teacher Recommendation Letter** written by a teacher.
- A signed **Civic/Religious/Volunteer Recommendation Letter** written by an advisor, supervisor, minister, etc.
 - A signed **Letter of Desire** written by you.
 - A CURRENT signed **Transcript** of your grades.
- A CURRENT signed **Printout** of your Community Service Record from your high school.

Please follow all instructions. If any information is missing or unsigned – your application will NOT be considered.

The letter of desire is most important and should begin:

"I would like to receive a scholarship from the Twinsburg Chamber of Commerce because..."

Tell us why you need or want the scholarship. Something about yourself and family, comments on your attitude, goals and desires; and anything else you feel would be beneficial for the Committee to know when evaluating your application.

Applications must be mailed or delivered in person to:

Twinsburg Chamber of Commerce
c/o Scholarship Committee
9044 Church Street
Twinsburg, Ohio 44087

If you are dropping off your application, business hours are Monday thru Friday (9:00am-4:00pm).

DEADLINE:

Applications must be received/postmarked at the Chamber office by 4:00pm on

Friday, April 7, 2017

NO EXCEPTIONS!

If you mail it close to the deadline this does not guarantee we will receive it.

We cannot be responsible for delayed mail delivery. **Emailed applications will not be accepted.**

2017 Scholarship will be awarded at a special luncheon ceremony on May 4, 2017. The scholarship recipient and two family members will be guests of the Twinsburg Chamber at the event. We look forward to receiving your application. Good Luck!

Sincerely,

Twinsburg Chamber of Commerce Scholarship Committee

Twinsburg Chamber of Commerce
2017 SCHOLARSHIP APPLICATION
STUDENT APPLICATION FORM

(Please print clearly)

Student name _____ Date _____

_____ Last First MI

Address _____

Street City State Zip

Phone _____ Email _____ Birthdate ____/____/____

Where do you attend high school /expected date of graduation? _____ / _____

What is your high school cumulative grade point average? _____ *(Please provide a copy of your current transcripts)*

What college/university/program do you plan to attend? *(Please include a copy of your acceptance letter, if applicable)*

What will your course of study be?

Please list your sports/extracurricular activities/work experience (both in and out of school):

Please list any recognition clubs that you are a member of and/or any awards you have received while in high school:

What other scholarships or financial aid have you applied for and/or received?

What volunteer experience are you most proud of? Why? *(Please attach a printout of your hours signed by Mrs. Johnson or Assistant Principal)*

Do you currently work for a business that is a member of the Twinsburg Chamber or have a *parent/guardian* who works for a business that is a Chamber member? *(Explain)*

Father's name _____ Mother's name _____

Employer _____ Employer _____

Employer Address _____ Employer Address _____

Occupation _____ Occupation _____

I certify that the answers given herein are true and complete to the best of my knowledge.

*Student signature Date

*Parent or Guardian signature Date

***Unsigned Student Application Forms WILL NOT be accepted.**

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CIVIC/RELIGIOUS/VOLUNTEER ADVISOR RECOMMENDATION FORM

Please complete this form (printed clearly or typed) or attach a signed letter on a separate piece of paper.

Student name _____

Last First MI

Advisor/Supervisor name _____

Last First MI

Organization name _____

Comments/Remarks _____

_____ / _____ / _____
 Advisor/Supervisor Printed Name *Advisor/Supervisor Signature Date

***Unsigned Civic/Religious/Volunteer Advisor Recommendation Forms WILL NOT be accepted.**

