

<p><i>For Chamber Office Use Only</i></p> <p>ACT/SAT Score _____</p> <p>Class Rank _____</p>
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**Chamber Foundation of Effingham County
2018 COMMUNITY SCHOLARSHIP PROGRAM**

High School Senior Application

QUALIFYING CRITERIA:

1. Any 2018 graduating high school senior who is an employee, the child of an employee, or the child of a member (in good standing) of the Effingham County Chamber of Commerce, is eligible to apply.
2. Must have at least a C average.

REQUIREMENTS:

- Applicant must submit the following to scholarship committee by **Monday, April 2, 2018.**
1. Completed, typed application (*May attach answers to application. Please observe space limitations. Applications available online at www.effinghamcountychamber.com*)
 2. High school transcript of grades
 3. ACT/SAT scores & Class Rank
 4. One letter of recommendation (Ex: a teacher, school counselor, coach, administrator, employer or clergy)

APPLICATION NOTIFICATION: Applicants will be notified of continued consideration by the end of April. **Finalists are required to participate in an interview process scheduled for Wednesday, May 2, 2018 and will be notified of the results within two days after the interviews.**

SCHOLARSHIP AMOUNT: \$1,000

USE OF FUNDS:

The scholarship funds are to be used for tuition, books and fees only. The funds may be also be utilized for workbooks and supplies at the campus bookstore. Funds are paid directly to the college upon receipt of enrollment verification.

Name: _____

Address: _____ City/State/Zip _____

Phone: _____ Age: _____ High School Attended: _____

Name of parent/guardian: _____

Name of College/training institute you plan to attend: _____

Expected course of study: _____

Other financial aid received or applied for: _____

(Chamber Member Company Name)

(Validating Signature of Chamber Member*)

(Print Name and Position of Person Signing the Form)

(Date)

(Applicant Signature)

(Date)

Return completed application and required data to:
Chamber Foundation of Effingham County
P O Box 643
903 N Keller Dr.
Effingham, IL 62401
Call 217.342.4147 for questions

***Application must be signed by a Chamber member owner, manager or personnel manager to be considered for scholarship.**

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Chamber Foundation of Effingham County
2018 COMMUNITY SCHOLARSHIP PROGRAM
High School Senior Application (cont'd)

Please complete questions below to explain your reason for applying and why you believe you should be selected for this scholarship. Comments should be **typed** in the space below. **Limit your comments to this page.** *(May attach answers to application if typewriter is not available. Please observe space limitations.)*

Describe your future career goals.

Describe your personal and family background.

Describe your school activities, work experience and community service involvement.