



PO Box 290186  
Wethersfield, CT 06129

## Scholarship Application Form - 2010 (2 or 4 Year College or University)

The Wethersfield Chamber of Commerce ("Chamber") will award a grand total of \$2,000 in scholarships to winning applicants, high school students, who intend to pursue higher education at an accredited university, 2-4 year college, or a vocational-technical/trade school. **This form is for student applicants who intend to enter a 2-4 college or university.**

Each applicant must meet the following basic criteria:

- Be a RESIDENT of Wethersfield;
- Be a SENIOR to be graduated in June, 2010;
- Has maintained a "B" GPA in 10<sup>th</sup>, 11<sup>th</sup>, **AND** 12<sup>th</sup> grades.
- Application must be legible, hand-printed or typed.
- All parts of the application must be complete and accurate.

Special consideration will be given to those applicants who have completed the Chamber-sponsored "Shadow Program" or who have volunteered at Chamber sponsored events like the Cornfest.

- Check this box if participated in the Shadow Program  
 Check this box if participated as a Cornfest Volunteer in 2009

(Copy of Volunteer Participation Form Required from Civics/Social Studies Dept.)

**ALL APPLICATIONS MUST BE MAILED TO THE CHAMBER AND AN APPLICATION MUST BE POST-MARKED ON OR BEFORE THE DEADLINE OF MARCH 31, 2010, to be considered.**

### APPLICANT'S INFORMATION:

Full Name: \_\_\_\_\_

Full Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Home Address (IF different from above address) \_\_\_\_\_  
\_\_\_\_\_

Birth Date (mm.dd.yyyy): \_\_\_\_\_ Age\*: \_\_\_\_\_

Phone #: (\_\_\_\_) \_\_\_\_\_ E-Mail: \_\_\_\_\_

Name(s) Parent(s) \_\_\_\_\_ or

Guardian(s): \_\_\_\_\_

School NOW attending: (Name) \_\_\_\_\_ in:

(Town): \_\_\_\_\_ Graduation Date: \_\_\_\_/\_\_\_\_/2010

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Wethersfield Chamber  
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PO Box 290186  
Wethersfield, CT 06129

APPLICANTS FULL NAME: \_\_\_\_\_

**Please list Sibling information** presently in (S)chool or (C)ollege:

Name: \_\_\_\_\_ Age: \_\_\_\_\_ S/C: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ S/C: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ S/C: \_\_\_\_\_

(Check if continued on additional page.)

**Activities & Community Service In and Out of School (Include any leadership roles.):**

Indicate name of organization(s), type of involvement and dates involved for each.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Check if continued on additional page.)

**AWARDS Received for Special Achievement(s)** in Education, Sports, community service or Personal Endeavors:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

(Check if continued on additional page.)

**MUST ATTACH COPY OF MOST RECENT SCHOOL TRANSCRIPT** which should include classes taken, grades received and class ranking.

**List: 2-4 Year Colleges or Universities ACCEPTED AT:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**What 2-4 Year College or University ATTENDING** in Fall: \_\_\_\_\_

Major: \_\_\_\_\_



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APPLICANTS FULL NAME: \_\_\_\_\_

**What profession(s) are you considering after college or university and why? How will this profession impact the local or regional or global business environment? Why should you be selected for an award?** (This section must be complete to be eligible for consideration.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Check if continued on additional page.)

**Do you have any work experience (including community or volunteer work)?** Yes ; No . **If yes, please list employer(s), occupation(s)/duties and dates employed:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Check if continued on additional page.)

**Do you feel it would be helpful for the Chamber's selection committee to be aware of any special family or personal circumstances?** Yes ; No  **If yes, please explain:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Check if continued on additional page.)

**I certify that the information provided in this application and its attachments is true.**

**Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_/\_\_\_\_/2010

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_/\_\_\_\_/2010

**Mail completed and signed application, transcript and attachments by deadline 3/31/10 to:**

**Wethersfield Chamber of Commerce  
ATT: Scholarship Committee  
PO Box 290186  
Wethersfield, CT 06129**

**QUESTIONS about this application? Call Jeanne Kelly, WCC Scholarship Committee at: (860) 513-4024 X215**  
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