



# CHARDON

## AREA CHAMBER OF COMMERCE

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

Please go to [chardonchamber.com](http://chardonchamber.com) for a fillable PDF of this application or email [mrizzo@chardonchamber.com](mailto:mrizzo@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.

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

PARENTS' NAME(S): \_\_\_\_\_

HIGH SCHOOL: \_\_\_\_\_ GRADUATION DATE: \_\_\_\_\_

COLLEGES, UNIVERSITIES OR TRADE SCHOOLS YOU HAVE APPLIED TO:

| NAME OF SCHOOL | HAVE YOU BEEN ACCEPTED?<br>(yes, no or don't know) | 2 OR FOUR YEAR DEGREE |
|----------------|--|-----------------------|
| _____          |  |                       |
| _____          |  |                       |
| _____          |  |                       |

WHAT MAJOR FIELD OF STUDY ARE YOU CONSIDERING?

\_\_\_\_\_

SPECIAL COURSES: List all Honors courses and Advanced Placement courses taken:

| <u>Course</u> | <u>Year Taken</u> | <u>Grade</u> |
|---------------|-------------------|--------------|
| _____         | _____             | _____        |
| _____         | _____             | _____        |
| _____         | _____             | _____        |
| _____         | _____             | _____        |
| _____         | _____             | _____        |
| _____         | _____             | _____        |

ACTIVITIES: In the space beside each category that you were involved in indicate what grade you were in during the time you participated.

Sports: \_\_\_\_\_

Band: \_\_\_\_\_

Service Clubs: \_\_\_\_\_

Honor Societies: \_\_\_\_\_

Other School Activities: \_\_\_\_\_

Church: \_\_\_\_\_

Community Volunteer Work: \_\_\_\_\_

WORK EXPERIENCE: Please list any jobs you have taken while in high school and the dates you were employed: \_\_\_\_\_

\_\_\_\_\_

PERSONAL STATEMENT: Please provide a statement between 300 and 600 words explaining what receiving this scholarship would mean to your future.

Seven horizontal lines for writing, each with a yellow highlight bar above it.

**The following information needs to accompany the application:**

- 1. **Two** recommendations must accompany this application. 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.
- 2. **Grade Transcript:** 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 application must be complete and have all required information in order to be processed and considered for scholarships.**

The information contained in this application is true and accurate to the best of my knowledge and ability. I acknowledge the Chardon Area Chamber of Commerce, in its decision making, may seek to verify any or all parts of said information; falsification of any information will result in an automatic disqualification.

Applicant Name \_\_\_\_\_ Date \_\_\_\_\_  
Email saved application to [mricco@chardonchamber.com](mailto:mricco@chardonchamber.com)

**Application and all additional materials must be postmarked by March 4, 2022.**