

Boca Grande Area Chamber of Commerce Scholarship Fund, Inc.
PO Box 704, Boca Grande, FL 33921
Phone: 941-964-0568

SCHOLARSHIP APPLICATION
(Application Deadline is April 1, 2021)

Personal Data:

Legal Name of Applicant _____
(first) (middle) (last)

Home Address _____
(street)

(town) (state) (zip code)

Mailing Address _____
(PO Box)

(town) (state) (zip code)

Length of time at this address _____

Home phone: _____ Social Security # _____

Email Address: _____

Family Information:

Name of Father or Male Legal Guardian: _____

Address: _____

Length of time parent/guardian at this address _____

Name of Mother or Female Legal Guardian: _____

Address: _____

Length of time parent/guardian at this address

Education Data:

Name of High School: _____ Year Graduating _____

Weighted grade point average: _____ Class Rank _____ of _____

Test scores: SAT _____ = _____ ACT _____
(verbal) (math) (total) (comp)

Non-Resident Student:

Attach letter of recommendation from Chamber Business Member Sponsor

School (college, university or vo-tech) you plan to attend in September. List schools in order of preference. If you wish, you may list only one.

NAME OF SCHOOL	CITY	STATE
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1st choice _____

2nd choice _____

3rd choice _____

Anticipated school major: _____

Work Experience:

List any job (including summer employment) you have had during the past 3 months.

Employer	Type of Work	Length of Employment	Hrs/Week
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Extracurricular & Community Volunteer Service:

List school activities and community volunteer services in which you have participated during the last four years. Attach an additional sheet if needed.

Career Plans:

Personal Statement:

Attach your personal statement (300 words or less) describing your reasons and needs for desiring scholarship assistance. Include any unusual circumstances.

MY SIGNATURE BELOW INDICATES THAT ALL THE INFORMATION CONTAINED IN THIS APPLICATION IS COMPLETE, FACTUALLY COMPLETE, AND HONESTLY PRESENTED.

(Student Signature) (Date)

(Parent or Guardian Signature) (Date)