



CONCORDIA AREA CHAMBER OF COMMERCE SCHOLARSHIP

APPLICATION FORM

The following form must be completed and returned to the Concordia Area Chamber of Commerce via email to concordiachamber1860@outlook.com by Friday, April 14, 2023.

I. Personal Information

_____/_____/_____
(LAST NAME) (FIRST NAME) (MIDDLE INITIAL)

_____/_____
(HOME ADDRESS) (years at address)

(CITY) (STATE) (ZIP)

(TELEPHONE) (E-MAIL ADDRESS)

Parent or Guardian's Name: _____

What College, University or Trade School do you plan to attend?

What do you plan to major in? _____

What are your future goals? _____

Why have you chosen to pursue your selected field? _____

What kind of work experiences have you had during the past 2 years? _____

Do you plan to work part-time to assist with your school expenses? _____

If yes, describe your plans: _____

II. Extra-Curricular Activities

List church, community and volunteer activities: _____

Please state what you consider your top accomplishment over the past four years, and explain the significance of this accomplishment in your life:

III. Along with this application, please email a photo that the chamber could use to concordiachamber1860@outlook.com. By signing this document, you grant the Concordia Area Chamber of Commerce permission to use your photo in the newspaper and/or online through social media.

(Signature of Applicant)

(Date)

Approval of Parents

I have read the statements in this application. They are correct, and I approve of this application.

(Signature of Parent or Guardian)

(Date)