

**Appomattox County Chamber of Commerce**  
**2008 Scholarship Application**  
(Deadline for submission is April 14, 2008)

**\*\*NOTE: Family members of Chamber's current Board of Directors or Scholarship Committee members are ineligible to apply for Chamber Scholarship.\*\***

**STUDENT INFORMATION:** (Applicant must be a direct relative of Chamber member or of the Chamber member's employee, and must reside in the same household in order to be eligible for the Chamber Scholarship)

Student's Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Indicate # of AND ages of siblings: \_\_\_\_\_

**PARENT/GUARDIAN INFORMATION:**

• FATHER'S (or Guardian) Name: \_\_\_\_\_

Employer's Name & Phone Number: \_\_\_\_\_

Occupation: \_\_\_\_\_

Is employer a current Chamber Member:  Y  N Relationship to Chamber Member:  Owner  Employee

• MOTHER'S (or Guardian) Name: \_\_\_\_\_

Employer's Name & Phone Number: \_\_\_\_\_

Occupation: \_\_\_\_\_

Is employer a current Chamber Member:  Y  N Relationship to Chamber Member:  Owner  Employee

Total combined income for 2007: \$ \_\_\_\_\_

**EDUCATION INFORMATION:**

List the accredited colleges/vocational schools to which you have applied and/or been accepted: (attach additional sheet if necessary)

Name: \_\_\_\_\_ Accepted:  Y  N

Name: \_\_\_\_\_ Accepted:  Y  N

Name: \_\_\_\_\_ Accepted:  Y  N

If you have not yet been accepted, when do you expect to be and to where? \_\_\_\_\_

What do you intend to study? \_\_\_\_\_

List, by name & amount, the scholarships you have applied for and/or received as of today: (attach additional sheet if necessary)

Name: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Received:  Y  N

Name: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Received:  Y  N

Name: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Received:  Y  N

Are there any unusual circumstances which curtail the family income or increase the family expenses? (Explain in Detail)

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

\_\_\_\_\_  
Dated

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Dated

\_\_\_\_\_  
Parent/Guardian Signature