

749 Hopmeadow Street P. O. Box 224 Simsbury, CT 06070

Phone: (860) 651-7307 info@simsburycoc.org

Fax: (860) 651-1933 www.simsburycoc.org

2017 Scholarship Application

In 2017, Simsbury Chamber of Commerce will award scholarships in excess of \$5,000 to graduating senior high school students. Please complete and submit this application, along with a **letter of recommendation**, no later than **March 31, 2017** to be considered. **No late applications will be accepted.**

Requirements:

- ❖ Connecticut Resident
- Completing high school education in 2017
- Planning to attend a 2- or 4-year college or university, or other institute of higher learning no later than Fall 2018
- ❖ GPA of 2.5 or higher

Thank you for applying for a 2017 scholarship. We look forward to receiving and reviewing your application.

Sincerely,

Lisa Gray
Executive Director

* The Simsbury Chamber of Commerce works to strengthen the bond between businesses and the community so that all of us can thrive. It serves as a partner in business, providing members with expanded access to potential customers, engaged business leaders, government affairs, local professionals and the community-at-large. All of us have a vested interest in our community and our region, and Chamber members are actively involved in the many opportunities available throughout our area.

We appreciate your support of our Premium Sponsors:

Fitzgerald's Foods

Hassett & George, P. C.

Simsbury Bank

| | MATION Application Date: |
|---------------------------|---|
| First Name: | Last Name: |
| Home Address: | City: Zip: |
| Home Phone: | Cell Phone: |
| E-mail: | Date of Birth: |
| | randparent, or guardian who is a member of the Simsbury Chamber of No If yes, Name: |
| Relationship: Parent | □ Grandparent □ Guardian |
| Place of Business: | |
| | |
| EDUCATION INFOR | RMATION |
| High School: | GPA: Graduation Date: (m/y) |
| Total SAT Score: | Total ACT Score: |
| Course of study after ara | aduation (if known): |
| | aduation (if known): |
| | ation (if known): |
| | |
| Career goal after gradua | |
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WORK HISTORY/VOLUNTEER ACTIVITIES

| Company/Organization Name | <u>Duties/Responsibilities</u> |
|---|--|
| Length of time in this position: | |
| Length of time in this position: | |
| Length of time in this position: | |
| Length of time in this position: (Please list additional | activities on a separate sheet of paper, if necessary) |

ESSAY QUESTION

On a separate sheet of paper, in 250 to 500 words, please answer this question:

How has your life been impacted by your interaction with your local community?

Please mail completed application and supporting materials to:

Simsbury Chamber of Commerce P. O. Box 224 Simsbury, CT 06070