2019 Old Saybrook Chamber of Commerce
C. WILFRED HUNTER MEMORIAL SCHOLARSHIP
ELIGIBILITY & APPLICATION PROCEDURES

Eligibility Requirements

◊ At least one of the following criteria must apply:
  1. Old Saybrook Resident or
  2. Immediate Family Member of a current Chamber of Commerce Member or
  3. An employee of a current Chamber of Commerce Member

◊ Applicant must be accepted into an accredited college, university or vocational school

◊ Application should display achievement in school and/or community-related activities

◊ The completed application must be submitted to the Chamber Office by 4pm on Thursday 4/25/2019.

◊ Immediate Family member of Board of Directors and/or Staff are not eligible to apply.

Application Procedures

◊ Complete scholarship application form (return pages 1-2 to the Chamber Office @ 1 Main Street)

◊ Include a personal letter to the scholarship committee outlining your future goals and aspirations, why you are applying for this scholarship and how you have been involved in the community.

◊ The Committee MAY request personal interviews with the applicants giving them the opportunity to introduce themselves and expound on why this scholarship is important to them.

◊ Include two letters of recommendation specifically for this Scholarship:
  • One letter must be from a teacher or a guidance counselor and
  • One letter from a supervisor of your community related or volunteer experience or employment
2019 Old Saybrook Chamber of Commerce  
C. WILFRED HUNTER MEMORIAL SCHOLARSHIP APPLICATION

APPLICANT NAME ____________________________________________

HOME ADDRESS _____________________________________________

EMAIL_____________________________ PHONE____________________

PARENT(S) /GUARDIAN NAME ___________________________________

CHAMBER MEMBER BUSINESS ___________________________________

________________________________________  ____________
APPLICANT SIGNATURE DATE

________________________________________  ____________
PARENT/GUARDIAN SIGNATURE DATE

Applications must be returned to:  
OLD SAYBROOK CHAMBER OF COMMERCE  
One Main Street, Old Saybrook, CT 06475

Application Deadline:  
Thursday, April 25, 2019 @ 4:00PM
APPLICANT NAME ____________________________________________________________

HIGH SCHOOL  __________________________________________________________________________

COLLEGE/SCHOOL ATTENDING IN THE FALL  ________________________________________________

ANTICIPATED MAJOR _______________  MINOR (IF APPLICABLE) ______________________________

◊ LIST EXTRA-CURRICULAR ACTIVITIES AND AWARDS

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

◊ LIST COMMUNITY SERVICE ACTIVITIES (INCLUDING ANY VOLUNTEERING)

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◊ LIST WORK HISTORY, INCLUDING ANY PART-TIME, SUMMER JOBS, ETC

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Application Deadline:
Thursday, April 25, 2019 @ 4:00PM