

**Vernon Parish Chamber of Commerce
Scholarship Application 2019**

*The Vernon Parish Chamber of Commerce will be awarding \$1,000 scholarships to at least four (4) deserving high school graduating students in Vernon Parish. The Scholarships are based on character, academic achievement, extra-curricular activities and community involvement. To QUALIFY, you must be planning to enroll in **some form of business degree program**; i.e. marketing, economics, finance, accounting, statistics, information management and technology, etc.*

*If you are interested in applying for a scholarship, please complete this application in full, to include **your signature and your high school Counselor's signature**. The completed application can be **MAILED** directly to Anne Causey, Executive Director at The Vernon Parish Chamber of Commerce, PO Box 1228, Leesville, Louisiana 71496. OR **DELIVERED** to The Vernon Parish Chamber of Commerce office located at 1309 North Fifth Street, Leesville LA. Your application must be received by The Chamber on or before **April 15, 2019**, to be considered by the committee.*

If you have any questions or concerns, please contact The Chamber at 337-238-0349 or via email at chambervernonparish@hotmail.com

COMPLETE ALL ITEMS

1. Full Name: _____
2. Phone Number: _____
3. Full Mailing Address: _____
4. School: _____
5. What college or Vo-Tech do you propose to attend?: _____
6. What do you plan to study?: _____
7. What is your high school grade average?: _____

8. What is your class rank in your senior class?:_____
9. How many units will you have completed in high school?:_____
10. List extra-curricular activities such as class officers, church activities, 4-H Club, FBLA, honors, etc. Please make as complete as possible. (Use additional pages if necessary)
- _____
- _____
- _____
11. Do you now or have you ever held a part-time job, if yes where and what are the average hours worked per week?:
- _____
12. In 500 words or less, explain what qualities and characteristics make you the ideal candidate for this scholarship? (Please attach additional page)

Final Check List:

Transcript:_____

ACT Score:_____

Activity Sheet:_____

Please provide a copy of your transcripts and proof of your ACT score. Failure to fully complete the application and provide the requested information will result in your application not being considered by the committee.

Your Signature

Counselor's Signature

(Counselor please sign and thereby signify correctness of student rank, grades and test scores.)