



Pickerington Area Chamber of Commerce 2020 Academic Scholarship Application

Last Name (Please Print)	First	Middle	Preferred Name
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Mailing Address, Number and Street	City	State	Zip
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Telephone: _____ Date of Birth: _____ Graduation Date: _____

THE SCHOLARSHIP

The Pickerington Area Chamber of Commerce offers a scholarship to a deserving High School Senior enrolling in the following schools: **Ohio State University-Newark, Ohio University-Lancaster/Pickerington, Columbus State, and/or Central Ohio Technical College**. The scholarship shall be used for direct educational expenses only, and will be paid directly to the student's school, once enrolled. This is a one-year, non-renewable scholarship. The Pickerington Area Chamber of Commerce does not discriminate against students due to race, color, nationality, or ethnic origin.

AREA OF STUDY

Students who apply for the Pickerington Area Chamber of Commerce scholarship do so with the intention of obtaining a certificate or degree.

SELECTION OF RECIPIENT

Selection of the student to receive the **\$1,000 scholarship** will be based primarily on the student's information as provided in the application and the assumption that the student will be seeking a degree or certificate. A committee comprised of members of the Pickerington Area Chamber of Commerce will be responsible for reviewing applications and essays, selecting the recipient, and presenting the scholarship. The decision of the Chamber is final.

ELIGIBILITY

Any High School Senior that attends Pickerington Schools, or works for a member of the Chamber, or is the child of a business that is a member of the Chamber.

DEADLINES

Applications must be submitted by April 21, 2020. The Scholarship will be awarded by May 18, 2020.

APPLICATION CHECKLIST:

- _____ Student application
- _____ Two letters of recommendation (not relatives)
- _____ Essay requirement (500 words)



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NON-SCHOOL ACTIVITIES (use additional paper if necessary)

List organizations, hobbies, community service, employment (including average hours per week and dates of employment), prizes and honors, etc.:

FINANCIAL INFORMATION

State any specific circumstances affecting your financial need which should be considered in review of this application including, but not limited to, divorce or separation, special care for aged dependents, special housing problems, other children in college, social security benefits, trusts, or expected income decrease. In addition, please include the Estimated Family Contribution towards tuition. **Add additional pages if necessary.**

ESSAY REQUIREMENT

It is the intent of the essay portion of the Pickerington Area Chamber of Commerce Scholarship application to give you the opportunity to personalize your application and to allow you to demonstrate your creativity and ability to express your thoughts. This essay must be typed and please confine your answer to 500 words. Please note that this essay will be used as an important document in scholarship consideration. Please tell why you feel the scholarship should be awarded to you.

I certify that the information contained within this application is complete and accurate, and I understand that submission of inaccurate information is sufficient cause for termination this application.

Signature of Scholarship Applicant

Date

Submit Scholarship Applications to:
Pickerington Area Chamber
Scholarship Committee
21 Lockville Rd., Suite 100
Pickerington, OH 43147

Or email to theresa@pickeringtonchamber.com

For questions, contact Theresa Byers at (614) 837-1958 or theresa@pickeringtonchamber.com.