The Ormond Beach Chamber of Commerce
Rob Ridder Scholarship Application Form – 2020

NEW DEADLINE FOR 2020 IS APRIL 30TH

INSTRUCTIONS:

Prospective applicants must be senior at one of the high schools located in Volusia County, and be the student of a parent (or legal guardian) that is a member of the Ormond Beach Chamber of Commerce. Additional criteria to be considered include community service, demonstrated leadership in school and community activities, character, integrity, initiative and other personal qualities, and financial need. Finalists will be required to participate in an interview in front of the selection committee. In addition, the following documentation must be attached to this application form:

1. High school transcript, including the applicant’s class rank and SAT/ACT scores.
2. One letter of recommendation from a teacher or counselor at the student’s current school.
3. Two letters of recommendation from people or organizations closely familiar with the applicant’s community service, leadership activities or charity work. Writers must neither be related to the applicant nor staff members of the applicant’s school.
4. Personal statement – in a one page letter, please write about your life, challenges, successes and obstacles you have overcome to get where you are today. Give us your life story so that we may be able to get to know you better!
5. Resume

STUDENT/APPLICANT INFORMATION:

Name: ____________________________________________________________
Address: __________________________________________________________
Phone: ____________________________________________________________
Email: ____________________________________________________________
Date of birth: __________________    Place of birth: __________________

Name of parent/guardian: ________________________________________________________

Name of parent/guardian business or place of employment: ____________________________

High School: _________________________________________________________________

Counselor’s name: ______________________________________________________________

Description of part time work, organizations, societies, clubs, and any other activities in which you have been active during the past four years (you can attach separate document if needed): ____________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

Honors and special recognitions:
__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

Colleges you have applied to: ________________________________________________

Which college is your first choice? Why? _________________________________________

__________________________________________________________________________

Have you been accepted? _____________________________________________________

Briefly describe your goals, aspirations and what separates you from the rest of your class: ________________________________________________________________

__________________________________________________________________________
Estimated Yearly College Expenses:

Annual Tuition $____________________
Annual Room & Board $____________________
Annual Books & Supplies $____________________

Total Expenses $____________________

Estimated Income from Grants/scholarships:

Bright Futures $____________________
Florida Pre-Paid $____________________
Other Scholarships $____________________
Expected Family Contribution $____________________

TOTAL Grants/Scholarships $____________________
BALANCE STILL NEEDED $____________________

AVAILABILITY FOR INTERVIEWS- UPDATED

Interviews will be scheduled the week after the deadline date of April 30th. All efforts will be made to select interview dates to accommodate the applicant and the committee and will most likely be done on Zoom.

I swear and affirm that the information provided on this application is true and correct to the best of my knowledge. I promise that, if selected, I will strive to meet or exceed
the stated requirements for the recipients of the Ormond Beach Chamber of Commerce Scholarship Fund.

______________________________              ____________________
Applicant’s Signature              Date

______________________________              ____________________
Parent/Guardian Signature              Date