

SCHOLARSHIP APPLICATION & CHECKLIST

The Peabody Area Chamber of Commerce each year takes pride in awarding scholarships to graduating seniors from area high schools who will further their education at post secondary institutions. These scholarships are awarded based on the applicant's scholastic achievement, interest in continuing education, participation and leadership in school and community activities and reputation for good citizenship and moral character.

Eligibility: The Peabody Area Chamber of Commerce Scholarship is available to any graduating senior who meets at least **ONE of the following** (check all that apply):

Student is a resident of Peabody Massachusetts

OR

Student is employed by a Peabody Area Chamber of Commerce member business

Name of Employer: _____

OR

Applicant's parent or legal guardian is the owner or an employee of a Peabody Area Chamber of Commerce member business.

Name of Business: _____

The award recipient will be determined by the Peabody Area Chamber of Commerce.

The scholarship amount is \$1000.00

THE APPLICATION PROCESS and CHECKLIST: (All criteria must be satisfactorily completed.)

Complete the attached **application in full.**



Eligibility - Member of the graduating class who is planning to major in Business

Applicants submit a 250-350 word essay answering the question:

“What has influenced your decision to pursue a career in business?”

A list of **School, Community Service Activities, and work experience.**
Include dates and a brief description of each.

Two letters of recommendation from non-relatives (**(1) educator - (1) person in your community**)

Submit the **entire application package (INCLUDING THIS CHECKLIST)** by **April 7, 2017** to:

Peabody Area Chamber of Commerce, 24 Main St. Peabody MA 01960

Upon review, students selected to interview with the Scholarship Committee Members will be contacted to schedule a date and time in May. The date and time of the interview to be determined by the Chamber of Commerce. **Scholarship Recipients only** will be notified **via mail** approximately one week after interview.

Scholarships will be awarded directly to the honoree upon presentation of a **PAID** tuition bill or payment plan accepted by the school.



2017 SCHOLARSHIP APPLICATION

Name: _____
(First) (Middle) (Last)

Address: _____

City State, Zip: _____ Telephone: _____

Date of Birth: _____ Email address _____

Academic Information:

Name of High School: _____

Overall Grade Point Average: _____ *(A transcript of grades is required.)*

Verification of Academic Information:

*(The above information is **mandatory and must** be verified by a high school guidance counselor or principal.)*

Signature of high school official: _____

Printed name and title of high school official: _____

Telephone number of high school official: _____

Future Academic Plans: *(If undecided, please indicate those you are considering. This information will not be used to determine scholarship winner(s).)*

Accredited post secondary institution: _____

Intended Major: _____ Intended Career Goal: _____

Signature of Applicant _____ Date _____

Checklist & Application must be received by the PACCC on or before April 7, 2017