

*Perryville Area
Chamber of Commerce
Women's Network*

for office use only

\$500

Scholarship Application

Please print & submit to:

#2 W. Ste. Maries, Perryville, MO 63775

NAME

ADDRESS

HOME PHONE

PARENT(S)/GUARDIAN(S)

PHONE/

HIGH SCHOOL COUNSELOR

EXT #:

Perryville Area Chamber of Commerce

Women's Network

Scholarship Application - \$500

- 1) Are you a Perry County resident? (Circle) Yes No
If "No"STOP!

- 2) During High School, how many hours of community service have you performed IN Perry County?

(Check one)

- ☐ 1 – 25 Hours
- ☐ 26 – 50
- ☐ 51 – 75
- ☐ 76 – 100
- ☐ 100+
- ☐ 200+

(Must provide documentation to support this community service)

- 3) School Attendance

Cumulative Attendance for High School: _____%

(Provide documentation by an appropriate school)

If you have had circumstances that has affected attendance, please explain _____

- 4) Do you have a job? (Circle) Yes No

On average, how many hours a week do you work? _____

WORK HISTORY

<u>EMPLOYER</u>	<u>AVERAGE HOURS WORKED PER WEEK</u>	<u>CONTACT PERSON</u>

- 5) On average, how many hours per week do you participate in extracurricular activities at school?

<u>ACTIVITY</u>	<u>AVERAGE HOURS PER WEEK</u>	<u>CONTACT PERSON</u>

- 6) Provide an official transcript/GPA

- 7) ACT Score _____ (Documented by School Official)

- 8) Complete a written narrative on a separate sheet of paper answering the following question.

Based on the community service you have you performed, how do you plan to continue this service in your adult life?

***Return Completed Application with all required documentation to counselor which must include transcript/GPA, attendance and ACT score.**