



*Your Community Connection*

## 2018 Fruita Chamber Scholarship Application

(use a separate sheet of paper for answers whenever necessary)

Name:

\_\_\_\_\_  
Last                      First                      Middle

Mailing Address:

\_\_\_\_\_  
Street Address/Apartment Number/PO Box

\_\_\_\_\_  
City                      State                      Zip Code

Parents/Guardian  
Name & Address:

\_\_\_\_\_  
Last                      First                      Middle

\_\_\_\_\_  
Street Address/Apartment Number/PO Box

\_\_\_\_\_  
City                      State                      Zip Code

Telephone:

\_\_\_\_\_ E-Mail: \_\_\_\_\_

Please list the degree you are seeking or what your field of study will be:

\_\_\_\_\_  
\_\_\_\_\_

What type of job do you hope to get after you complete your field of study?

\_\_\_\_\_  
\_\_\_\_\_

Please tell us about your family, extracurricular activities (School & community activities, hobbies and volunteer work) and list any employment records:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What college do you plan on attending? \_\_\_\_\_  
Please attach a letter of acceptance (if available)

Do you plan to work while attending college? \_\_\_\_\_

Is there any other information you feel is important for us to know about you or your goals?

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Applicant Signature: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Please attach:

1. Two (2) letters of recommendation (from people other than family members, one of which should be from outside the school system).
2. A copy of your current high school transcript.

Please return this Scholarship Application with two letters of recommendation and current high school transcript by **April 2, 2018** to:

Fruita Area Chamber of Commerce  
432 E. Aspen Ave.  
Fruita , CO 81521