



ANDROSCOGGIN CHAMBER OF
COMMERCE
ADULT SCHOLARSHIP APPLICATION
2011

Scholarship Checklist

Prior to submitting your application for scholarship please take a minute and review that you have all the necessary information. **Incomplete applications will not be considered. Priority will be given to students who have not received our scholarship before.**

Thank you

Education Committee

Check List

- ☺ Essay
- ☺ Completed and signed copy of scholarship application
- ☺ Completed and signed employment verification form
- ☺ Letter of reference/recommendation from employer

**ANDROSCOGGIN COUNTY CHAMBER OF COMMERCE
ADULT SCHOLARSHIP APPLICATION**

Name: _____

Address: _____

Telephone: _____ **Cell:** _____

E-Mail: _____

Place of Employment: _____

Address: _____

Number of Years Employed There: _____

College Attending: _____

Location: _____

Are you a matriculated student there? ___ Yes ___ No

Academic program: _____

G.P.A. _____

ANDROSCOGGIN COUNTY CHAMBER OF COMMERCE ADULT SCHOLARSHIP

The purpose of the Adult Scholarship Program is to recognize an employee of a Chamber member who has shown effort in advancing his or her education at the college level.

Scholarship Awards

Three scholarships of \$1000 each will be awarded annually at a Chamber function. The scholarships will be awarded directly to the recipient. One award will be made per individual, although the award may be divided to apply to two semesters of college work.

- Preference will be given to applicants who have not previously won an Adult Scholarship from the Androscoggin County Chamber of Commerce
- Preference will be given to applicants who have not attained a previous bachelor's degree

Eligibility

Applicants will...

- 1) Be employed 20 or more hours by a member of the Androscoggin County Chamber of Commerce
- 2) Begin course(s) within 6 months of receiving award
- 3) Be matriculated in college-level coursework applicable toward an Associates or Bachelor's degree
- 4) Be at least 25 years old

Application Requirements

- Scholarship application
- 300 word typewritten essay (see attached)
- Completed employer verification form
- Letter of reference/recommendation from employer
- E-mail applications will not be accepted unless on deadline date
- **Application MUST be complete to be considered!**

Deadlines

The application and employer verification form must be received by Friday, April 29, 2011. Recipients will be notified by June 1, 2011. (Scholarship recipients will be notified by mail/e-mail.)

**ANDROSCOGGIN COUNTY CHAMBER OF COMMERCE
ADULT SCHOLARSHIP**

Employee Verification Form

Applicant's Name: _____ has applied for an
Androscoggin County Chamber of Commerce Scholarship. Please verify that
this individual is currently employed by you.

Date of Employment: _____

Position: _____

Supervisor's Name _____

I verify that this employee works a minimum of twenty hours per week at:

PRINT NAME: _____

Supervisor's Signature: _____ Date _____

Please Send to: Androscoggin County Chamber of Commerce
PO Box 59
Lewiston, Maine 04243-0059
FAX: (207) 783-4481

**ANDROSCOGGIN COUNTY CHAMBER OF COMMERCE
ADULT SCHOLARSHIP**

Essay

Directions:

Please write an essay of **no more than 300 words** on the topic below. Your essay should be word processed and submitted on a separate page that includes your name, signature, and the date.

What are your dreams/goals for the future? How will a college education help you realize your dreams/goals? How does this particular scholarship fit into your plans for the future?

I give the Androscoggin County Chamber of Commerce Education Committee permission to use part or this entire essay in a press release announcing scholarship recipients.

Signed

Date