

Greater BucksMont Chamber of Commerce

P.O. Box 3014, Warminster, PA 18974 - 215-672-6633- cell-215-280-0599

Scholarship Application Form

Name _____ School _____

Address _____ Phone # _____

FAMILY INFORMATION: **Father's Name** _____ **Mother's Name** _____

Children in your family: _____ **Ages** _____, _____, _____, _____, _____.

SCHOLARSHIP: SAT: READING/WRITING _____ MATH _____ **TOTAL** _____

CLASS RANK	Rank/ Total	Grade Point Average
11th Grade	_____ / _____	_____
12th Grade	_____ / _____	_____

List all academic awards or honors you have received while in high school

COLLEGE/TECH. SCHOOL INFORMATION

College Name	Accepted-Y/N	Major	Estimated Cost/year
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

SCHOLARSHIP INFORMATION

Name	Accepted (Y/N/?)	Amount/#years	Sponsor
_____	_____	_____	_____
_____	_____	_____	_____

EXTRACURRICULAR ACTIVITIES (High School)

COMMUNITY ACTIVITIES (High School)

EMPLOYMENT INFORMATION:

Employer	From/To	Responsibilities
_____	_____	_____
_____	_____	_____

ESSAY QUESTION: Please submit your answer to one of the following questions.

1. Describe a time when you experienced triumph over adversity
2. What human values are most important to you?
3. The Generation Gap -Real or imagined? What are the Positives? Negatives?
4. What caused you to pick your college major? How do you plan to use your education?
5. What was the greatest impact, or the most important lessons, you have learned from the COVID-19 pandemic?

Signature _____ Date _____

Email Completed Application to: judydoherty@bucksmontchamber.com