

**RIDGECREST CHAMBER OF COMMERCE  
Scholarship Application**

**Name:** \_\_\_\_\_ **Age:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Home Address: \_\_\_\_\_

Phone: \_\_\_\_\_ email: \_\_\_\_\_

Parent(s) or Guardian(s):

1. Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_ Work Phone: \_\_\_\_\_

2. Name \_\_\_\_\_ Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Brothers/Sisters:

How many? \_\_\_\_\_ Ages? \_\_\_\_\_

Which brothers and sisters are in college? \_\_\_\_\_

Your verifiable GPA through 7th semester: \_\_\_\_\_ (Please attach current transcript)

Current High School: \_\_\_\_\_ Graduation date: \_\_\_\_\_

Planned major course of study at college: \_\_\_\_\_

School Activities: (i.e., sports, clubs, organizations, etc., and include any office (s) you have held) Attach a separate sheet if necessary.

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Community Activities: (i.e., church, scouts, social, volunteer and work experience, etc.) Attach a separate sheet if necessary.

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**APPLICANT'S CERTIFICATION:**

I hereby certify that the information provided with this application is truthful and to be considered for this scholarship. I authorize the release of all my grades/transcripts to the Ridgecrest Chamber of Commerce Scholarship Committee.

I further understand that my application will not be considered unless all required information is completed, and appropriate documents attached.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_