



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: _____

Siblings:

How many? _____ Ages? _____

Are any siblings 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.

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



128 E. California Ave, Suite B
Ridgecrest, CA 93555

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: _____