

Cuyahoga Falls Chamber of Commerce
2019 SCHOLARSHIP APPLICATION
STUDENT COVER LETTER



February 1, 2019

Dear Student:

The Cuyahoga Falls Chamber of Commerce is pleased to announce that this year it will be awarding scholarships to graduating seniors **who reside in the city of Cuyahoga Falls AND Silver Lake**. Applications can also be found on our website at www.cfchamber.com.

The Scholarship Committee will call back the top applicants for an interview. The decision of the Chamber's Selection Committee is final and will be based on the following criteria: student desire, goals, grades, financial need, school activities, outside interests, community activities and one teacher recommendation.

The scholarship money awarded is to be used for a course of study in any accredited college. The scholarship can be used for tuition and books only and is not renewable. Proof of enrollment submitted to the Chamber Office will be required prior to disbursement of funds. *The scholarship money that is awarded in 2019 is valid for 2019 only. (*Once a check has been sent to the college/university no refunds will be issued.)

To be considered for a scholarship, you must submit the following information:

- An **application form** filled out by you and signed by you and your parents
 - A signed **teacher recommendation form** written by a teacher
 - A signed **letter of desire** written by you
 - A CURRENT signed **transcript** of your grades

If anything is missing/unsigned when submitted - your application will NOT be considered.

Sample Letter of Desire:

"I would like to receive a scholarship from the Cuyahoga Falls Chamber of Commerce because..."

Tell us why you need or want the scholarship. Something about yourself and family; comments on your attitude, goals and desires; and anything else you feel would be beneficial for the Committee to know when evaluating your request.

Mail/Drop off application here:

Cuyahoga Falls Chamber of Commerce, c/o Scholarship Committee, 151 Portage Trail, Suite 1, Cuyahoga Falls, OH 44221. (If you are dropping off your application, we are at the corner of Portage Trail and Second Street with parking in the GREEN Parking Deck on Second Street. Our signs facing Second Street and Portage Trail are red white and blue and look like our logo.)

DEADLINE:

Applications must be received/postmarked at the Chamber office by 5 pm on

Thursday, March 21, 2019 NO EXCEPTIONS!

If you mail it close to the deadline this does not guarantee we will receive it.

We cannot be responsible for delayed mail delivery.

2019 Scholarships will be awarded at a special luncheon ceremony on Tuesday, June 25, 2019 at the **Natorium** in **Cuyahoga Falls**, where the 2019 scholarship recipients and two family members will be guests of the Chamber.

Sincerely,

Laura A. Petrella
CEO

Cuyahoga Falls Chamber of Commerce
151 Portage Trail, Suite 1
Cuyahoga Falls, Ohio 44221
p 330-929-675 | info@cfchamber.com | www.cfchamber.com

Cuyahoga Falls Chamber of Commerce
2019 SCHOLARSHIP APPLICATION
STUDENT APPLICATION FORM



Student name _____ Date _____
Last First MI

*Address _____
Street City State Zip

***Applicant must reside in Cuyahoga Falls or Silver Lake**

Email _____ Phone _____ Birthdate ____/____/____

What high school do you attend?

What college/school do you plan to attend?

What will your course of study be?

Please list your activities (both in and out of school) or any awards you've received:

What other scholarships or financial aid have you applied for?

What is your high school grade point average?

Do you have any work experience? (Explain)

Father's name _____ Mother's name _____

Address _____ Address _____

Employer _____ Employer _____

Occupation _____ Occupation _____

What are the ages of other children in your family? _____

I certify that the answers given herein are true and complete to the best of my knowledge.

1 _____ / _____

*Student signature

Date

2 _____ / _____

* Parent or Guardian signature

Date

***Unsigned applications WILL NOT be accepted.**

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TEACHER RECOMMENDATION FORM



**You may use this form or submit on a separate piece of paper*

Student name _____
Last First MI

Teacher name _____
Last First MI

Subject taught _____

Remarks _____

1 _____ / _____ / _____
Teacher Printed Name *Teacher signature Date

***Unsigned Teacher Recommendation Forms WILL NOT be accepted**



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***STUDENTS TRANSCRIPTS**

**Please attach transcripts to this form*

Student name _____
Last First MI

ATTACH TO
BACK OF THIS
FORM

1 _____ / _____
*Student signature Date

***Unsigned Student Transcripts WILL NOT be accepted**