


HARFORD COUNTY CHAMBER OF COMMERCE

Merit Scholarship Program



This application and supporting material must be postmarked by April 15th to:

Harford County
Chamber of Commerce
108 South Bond Street
Bel Air, MD 21014

Merit Scholarships for High School Seniors

APPLICATION

Check the scholarship for which you would like to apply. You may apply for more than one scholarship, however, a separate application and supporting documents are required for each.

<input type="checkbox"/> Business	<input type="checkbox"/> Medical/Health	<input type="checkbox"/> Teacher Education
<input type="checkbox"/> Engineering Technology	<input type="checkbox"/> Science/Math/Technical	

Name: _____ Parent(s)' or Guardian(s)' Names: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Telephone Number: _____ High School Telephone Number: _____

How did you hear about this scholarship? _____

Cumulative 3 year GPA: _____ (See Scholarship Summary Description for minimum GPA requirements. Scholarship Committee may waive GPA requirements upon documentation of special circumstances)

List the post secondary schools to which you have applied and indicate if you have been accepted:

Medical and Engineering Technology:

When did you apply to Harford Community College? _____

When did you apply for financial aid through Harford Community College's financial aid office? _____ (THIS IS A REQUIREMENT)

Please **type an ESSAY**, not to exceed two pages, to indicate the following information:

- High school, work and community activities in which you have been involved and your personal contributions to those activities including any leadership roles
- Awards and recognition you have received
- Reasons for choosing your career and your educational goals
- Reasons you deem yourself worthy of this scholarship, including unusual situations
- Technical skills you possess

ADDITIONAL ITEMS: **You MUST enclose:**

- 1) An official transcript of high school credits **INCLUDING THE CURRENT REPORT CARD.**
- 2) Two signed letters of recommendation from people who have known you for at least one year and who are not related to you. **ONE** of the letters **MUST** be from a teacher.
- 3) Interview may be required.

I certify that my responses on this application are true and factual. If selected, I hereby consent to and authorize the use and reproduction of my name and photographs by the Chamber or anyone authorized by the Chamber of any and all photography in film or print from which may be taken of me, in any form and for any purpose whatsoever without compensation to me. It will not be necessary to notify me when these pictures or my name is being used.

Date

Signature