

**LETCHER COUNTY CHAMBER OF COMMERCE
SCHOLARSHIP
2019 APPLICATION**

Name of Applicant: _____
(Last) (First) (Middle)

Name of Parents or Guardians: _____

Address of Applicant: _____

Telephone Number of Applicant: _____

High School: _____

Class Rank: _____ Number in Class: _____

SAT Score (combined essay, critical reading & math scores):_____ or ACT Score: _____

College or Post-Secondary Program you plan to attend: _____

- **School/Community Leadership and Service Activities (Please enumerate and explain in an essay of no more than one typewritten page.)**
- **Recommendation (Attach two letters of recommendation - one from a teacher and another from a community/business leader who is in a position to evaluate character, service and leadership.)**
- **A transcript of grades**

Please forward Scholarship Application and supporting documents by April 19, 2019 to:

Letcher County Chamber of Commerce

P.O. Box 127

Whitesburg, KY 41858

By signing below, I certify that all information submitted and provided in regard to my eligibility for the Letcher County Chamber of Commerce Scholarship is true and correct to the best of my knowledge. I understand that should any information be found to be false or incorrect, my application will become null and void and I will be disqualified.

Selected Scholarship Candidates will be contacted and scheduled for an interview with the Letcher County Commerce Scholarship Committee.

Applicant's Signature

Date _____