

**St. Mary Chamber of Commerce
Scholarship Award**

Eligibility:

1. The recipient shall be a student enrolled in an accredited high school in the St. Mary Parish area for a minimum of 4 continuous semesters upon graduation.
2. The recipient shall have a scholastic grade point average of 3.0 or better for his/her Junior year and the first semester of his/her Senior year in high school. The student must take the ACT test and achieve a minimum score of 20 points.

A need for financial assistance will be considered in awarding the \$1,500.00 scholarship.

The recipient shall be of good moral character and shall have displayed an aptitude of leadership in the school system and in the community in which they live.

The applicant should contact the principal or guidance counselor to obtain an application for the Scholarship Award. **The application forms must be filled out and returned no later than March 31st to St. Mary Chamber of Commerce Scholarship Committee, P.O. Box 2606, Morgan City, LA 70381**

Purpose:

The purpose of this scholarship is to give aid, free and without obligations, to a promising student of the St. Mary area and to help make a college education financially possible for a student who needs or desires such support. And who is interested in a professional career.

Benefits:

One two semester scholarship shall be awarded each year in the minimum amount of \$500 per semester based on GPA requirements.

Requirements & Limitations

1. Only one student from each high school in St. Mary Parish shall be selected for this scholarship per calendar year.
2. The student shall be required to maintain a minimum 2.5 grade point average (on a 4 point college grade system) the first semester to be eligible for the second semester grant.
3. The student must be a full time student, carry at least 12 hours per semester.
4. The recipient is required to attend a university, college or technical institute in the State of Louisiana.
5. The recipient shall be selected and publicly recognized on or before graduation from high school. A letter of acceptance specifying the university to be attended is required.
6. Whenever possible scholarship money shall be paid to the college or university office of the Auditor of Director of Financial Aid, with the student being permitted to draw at a basic rate of \$500.00 per semester for a period of two semesters.
7. The recipient must make a formal request to the university for entrance approval, immediately upon graduation from high school.

8. A scholarship holder whose college career has been interrupted by military service may apply for re-instatement of the scholarship after completion of military service.
9. The St. Mary Chamber of Commerce Scholarship Committee shall base its final decision on the applicant's high school scholastic records, character leadership qualities both in the school system and the community, seriousness of purpose, results of ACT test and financial need.
10. The scholarship holder shall maintain standards of good moral character at all times during the life of the scholarship and any failure to maintain these standards, at the discretion of the scholarship committee, may result in the withdrawal of the remaining scholarship benefits.
11. The decision of the St. Mary Chamber of Commerce Scholarship Committee shall be final.
DEADLINE MARCH 31st.
12. Completed applications must be returned before March 31st to:
St. Mary Chamber of Commerce
Scholarship Committee
Post Office Box 2606
Morgan City, LA 70381

St. Mary Chamber of Commerce Scholarship Award Application

Personal Information:

Deadline March 31st

Your Name: _____
Social Security# _____ Home Address: _____

Phone _____ Date of Birth _____

Name of High School _____

Cumulative Grade Point Average _____ Composite ACT Score _____ What are
your favorite recreational activities?

Experience:

List below jobs, which you have held, starting with the most current:

Name of Employer	Position	Dates
_____	_____	_____
_____	_____	_____
_____	_____	_____

Career Information:

Name of technical school, college, or university you wish to attend.

What will be your major field of study?

If undecided, please indicate two fields if interest.

present career plans?

What are your

Family Information:

Father's (Guardian) name: _____

His employer and nature of his employment: _____

Mother's name: _____ Her

employer and nature of her employment: _____

Number of children that live in your household _____

Number of theses attending college next fall _____

Financial Resources:

Approximate Annual Gross Family Income: <u> </u> Below \$10,000	<u> </u> \$10,000 - \$19,999
<u> </u> \$20,000 - \$29,999	<u> </u> \$30,000 - \$39,999
<u> </u> \$40,000 - \$49,999	<u> </u> \$50,000 - \$59,999
<u> </u> \$60,000 - \$69,999	<u> </u> \$70,000 - \$79,999
<u> </u> \$80,000 - \$89,999	<u> </u> over \$90,000

Have you been awarded any other scholarship? _____ My estimated financial resources for the coming year:

My present cash and savings: _____%

Contributions from parents and relatives: _____%

Money value of other scholarships and awards: _____%

My anticipated earnings from summer or part time jobs: _____% Income from other sources: _____%

Would you be financially able to attend college without the aid of this scholarship?

 no yes

Any Comments:

Honors:

In the space below, list the scholastic and honorary awards that you have received during your high school career. Also, include any extracurricular school activities in which you participated, include offices held and honors. Feel free to attach copies or an additional sheet.

Community Activities:

List Community activities you have participated in (including church, civic organizations, special projects:

Separate sheets may be attached to complete any portion of this application.

****Attach a one full page thesis page on "Why You Think Higher Education Is Important". **Attach a transcript of your high school grades including the first semester of your Senior year, signed by your principal or his representative or school Guidance Counselor, and a copy of your ACT scores.**

Date: _____ Signature of Applicant _____

Date: _____ Signature of Parent/Guardian: _____

Mail Application to: **St. Mary Chamber of Commerce C/O Scholarship Committee**
P.O. Box 2606
Morgan City, LA 70381