



## **2018 UNIVERSITY SCHOLARSHIP APPLICATION**

The El Dorado Hills Chamber of Commerce is proud to offer a scholarship to graduating seniors who plan to continue their education in either a college or university.

### **To qualify you must:**

- Be a resident of El Dorado Hills
- Graduate from Oak Ridge, Ponderosa, or Union Mine High School in 2018
- Attending a university or college
- Have the completed application packet in the El Dorado Hills Chamber office by **Thursday, March 1, 2018**

### **Your application packet should include:**

- The Chamber scholarship application
- Two letters of reference
- A copy of your transcripts
- An essay describing what you have learned through your community service experiences and how this knowledge has influenced your perspective toward life (500 – 800 words)

### **Submit application to:**

El Dorado Hills Chamber of Commerce  
Attn: Sherri Pellegrini  
2085 Vine Street, Suite 105  
El Dorado Hills, CA, 95762

**2018 University Scholarship Application**

Applicant's Name: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ School Attended: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Scholastic Standing: GPA \_\_\_\_\_ Class Standing \_\_\_\_\_ of \_\_\_\_\_

Honors and Awards received \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Activities in School \_\_\_\_\_

Activities in Community \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Schools to which you have applied \_\_\_\_\_

Organizations in which you hold membership \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Financing of your education by your parents:     None.     In Part.     Totally.

Major field of interest \_\_\_\_\_

Employment experience \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

List of other scholarships for which you have applied \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Parent's Financial Statement**  
**(Confidential)**

Length of time with present employer \_\_\_\_\_

Father \_\_\_\_\_ Mother \_\_\_\_\_

Approximate yearly gross income \_\_\_\_\_

Do you  own or  rent your current residence.

Medical expenses not covered by insurance \_\_\_\_\_

Extraordinary expenses (child support, alimony, medical, etc.):  
\_\_\_\_\_

Total number of dependents in family living at home and their ages (include all family members)  
\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

College savings for student \_\_\_\_\_

How much has the student saved \_\_\_\_\_

How much do you feel you will be able to contribute towards your student costs \_\_\_\_\_

Anticipated college costs (include tuition, fees, housing, books, etc) \_\_\_\_\_

Do you have any other children attending university, college, technical or vocational school?

Name \_\_\_\_\_ Age \_\_\_\_\_ School \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ School \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ School \_\_\_\_\_

Do you have other children you have already assisted through college?  Yes.  No.

Please use the space below to explain any special problems or unusual circumstances which makes it difficult for you to contribute towards this student's continuing education:

Father's signature \_\_\_\_\_ Mother's signature \_\_\_\_\_

**EL DORADO HILLS CHAMBER OF COMMERCE**

NAME \_\_\_\_\_

Any further information you feel might be helpful:

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Please describe yourself:

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