Ambassador SCHOLARSHIP APPLICATION

RETURN BY JULY 20TH TO:

Ambassador Scholarship Committee Fairmont Area Chamber of Commerce PO Box 826, Fairmont, MN 56031

Sponsored by the Ambassadors of the Fairmont Area Chamber of Commerce

For Students in a Business related field entering their Junior or Senior post secondary year or last year in a technical school

Name:					Last four digits of your Social Security Number:				
Address:									
Parent/Guardian:					Phone:				
High School:									
College GPA:				Age/January 1st:					
COMMUNITY SERVICE									
Activities*	Local		County		State		Year		
STUDENT GROUP ACTIVI	TIES						l		
Organization*		Actively		Local	County	State		Year	
STATEMENT									
Comment on what activities hav	e been most meaning	gful to your	persona	l develop	ment.				

^{*} Additional information on back.

WORK EXPERIENCE			
Please list jobs (including summ	ner employment) you have held in the I	past three or four years.	
Job*	Employer	Approximate Dates of Employment	Approximate Number of Hours Spent Per Week
ESSAY			
Each candidate should write a pap	per sharing his/her personal vision utiliz	ing your business degree. The essay sl	nould be 300-500 words.
The selection committee may use	this essay for reference during the perso	onal interview.	
Please prepare essay and attach a	copy to this form.		
Please list all sources of financia	al assistance you expect to receive. (Inc	lude grants, scholarships and finan	rial aid)
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Name of Post Secondary School	ol		
Address			
Junior Senior			
Vocation/Major			
What are your future career pla	ans?		
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What are your future career goa	als?		
 Note: Please attach a copy confirm achievement of a 3 	of your most recent transcript/grade 3.0 GPA on a 4.0 scale.	es. The scholarship will be awarde	ed after a review of grades to
SIGNATURE OF APPLICA	ANT		
I certify that all information gi	ven on this application is true, correct	and complete,	
Applicant:			Date:

^{*} Additional information on back.