



SHAWNEE

Chamber of Commerce

Betty Charlton Memorial Fund

Shawnee Chamber of Commerce Betty Charlton Scholarship Application –2007

PERSONAL DATA

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

Address: _____
(Street) (City) (State) (Zip)

Phone: _____ Date of Birth: _____

Social Security Number: _____ Male ___ Female ___

Parents'/Guardians' Names: _____

Parents'/Guardians' Address (if different from yours): _____

ACADEMIC DATA

Name of High School _____ Year of Graduation _____

Please attach a current transcript.

Name of Institution you will be attending: _____

Why do you want to attend this school? _____

What is your intended field of study? _____

What do you hope to do with your education? _____

SCHOOL AND COMMUNITY INVOLVEMENT

List any organizations in which you have been a member or jobs in which you have been employed. Organizations may include academic, athletic, civic, religious or social groups. Jobs may also include volunteer work or internships.

<u>Activity</u>	<u>No. of Years</u>	<u>Positions or Offices Held</u>

List any awards, honors or recognition received:

Which of the above experiences (participation in a particular activity, leadership position or honor received) has been most important to you?

I hereby confirm that all information provided on this application is correct and I understand that any false information automatically disqualifies me from eligibility.

(Signature of Applicant)

(Signature of Parent/Guardian)

(Date)

Submit completed application by 5:00 p.m. , March 21, 2007 :

Shawnee Chamber of Commerce

15100 W. 67th Street, Suite 202

Shawnee, KS 66217

(913) 631-6545

(913) 631-9628 - FAX