



**THE UNITED REGIONAL CHAMBER OF COMMERCE**

**JACQUELINE C. STACK  
SCHOLARSHIP PROGRAM APPLICATION**

**INSTRUCTIONS** – Please read all instructions before completing this form

**1. Make sure you are eligible. Applicants must:**

- ✓ *Be the son or daughter of a member in good standing with The United Regional Chamber of Commerce. Includes all employees of enrolled members.*
- ✓ *Be a high school senior who has applied to an accredited four-year college.*
- ✓ *Submit a sealed transcript from the high school registrar's office. Applicant must have a cumulative GPA of 3.0 or higher (B Average or higher).*
- ✓ *Perform uncompensated community service. Complete Section III of the application describing volunteer community service performed. Submit signed certification from a supervisor of the organization for which the community service was provided.*

**2. Fill out this application form completely.**

- ✓ *Use a typewriter or black ballpoint pen (print only), or a computer (tape or paste each answer in at least 10-point type).*
- ✓ *Applications must be written in English or translated into English prior to submission.*
- ✓ *All information provided is subject to verification. False, inaccurate, illegible, or incomplete applications will be disqualified.*

**3. Submit fully completed application to:**

- ✓ *The United Regional Chamber of Commerce, 42 Union Street, Attleboro, MA 02703 by **April 15, 2014.***

**PART I**

**APPLICANT INFORMATION**

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

\_\_\_\_ Male

\_\_\_\_ Female

Date of Birth (month/day/year) \_\_\_\_/\_\_\_\_/\_\_\_\_

Home Address: \_\_\_\_\_

Names of Parents/Guardians: \_\_\_\_\_

Applicant's Phone (\_\_\_\_) \_\_\_\_\_ Parents/Guardian Work Phone (\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_

High School Name & Address: \_\_\_\_\_

Name of College/University to be attended (if known) \_\_\_\_\_

**Chamber Member Business:** \_\_\_\_\_

**Chamber Member Business Contact Person:** \_\_\_\_\_

## PART II

### **HIGH SCHOOL TRANSCRIPT**

Submit a sealed high school transcript mailed to the Chamber office from the school registrar.

## PART III

### **COMMUNITY SERVICE ACTIVITY**

Briefly answer the following questions; additional information may be submitted on a separate sheet.

What was your volunteer community service activity?

How did you become involved in the activity?

What role did you play in the activity?

How much time did you spend on the activity?

When did the activity start and how long did it last?

How did your activity impact others?

How did your activity impact you?

**REQUIRED CERTIFICATION:** Must be signed by a supervisor involved with the community service activity.

NAME OF SUPERVISOR: \_\_\_\_\_ TITLE: \_\_\_\_\_

(Print)

SUPERVISOR'S SIGNATURE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

DAYTIME PHONE: \_\_\_\_\_

## PART IV

**APPLICANT AGREEMENT** To be completed by applicant and parent/guardian.

*We certify that all information contained in this application is true and factual. We also agree that if applicant is selected, The United Regional Chamber of Commerce may use applicant's name and likeness and any other information or materials provided by applicant for purposes of news publicity in all media, including print, photographs, videotapes and electronic media, including but not limited to, Internet Websites, and CD-ROMs.*

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_