

## **Citizenship Award Scholarship Application**

Date:		
Name:		
Address:		
Date of Birth:		
High School:		
Cumulative GPA:		
College/Trade School:	Accepted: Y	N
Major/Field of Study:		
Career Goal:		
Annual Tuition Cost:		
Room & Board:		
Travel & Other Costs:		
Total Anticipated:		
Financial Aid/Grants Expected or Approved	d (if known):	

## **Family Information**

Father/Gua	rdian:	
Occupation	:	
Employer:		
Mother/Gua	ardian:	
Occupation	:	
Employer:		
Siblings:	First Name	Age

1.	Please tell us about your involvement in the community and volunteering in the Town of Norwell:		
2.	Essay Submission: all submissions should by typed and at least one page.		
	Essay prompt: Choose a personal experience from your own life and explain how it has influenced your own development:		
I here	nformation provided her is correct, true, and complete to the best of my knowledge; by agree to the governing rules and regulations adopted by the Norwell Chamber mmerce Scholarship Committee. The decision of the Committee will be final.		
Parer	nt/Guardian Signature:		
Date:			
Stude	ent/Applicant Signature:		
Date:			
Schola	rship does not discriminate on bases of grade, age, race, religion, ethnicity, national origin, disability or sexual orientation.		

Norwell Chamber of Commerce P.O. Box 322 Norwell, MA 02061