



**Dr. Nancy I. Davis Memorial Leadership Scholarship
\$1,500 CASH SCHOLARSHIP**

3157 Mt. Morris Road, #103, Waynesburg, Pa 15370 - 724-627-5926
Email: info@greenechamber.org Web: www.greenechamber.org

CRITERIA

1. Applicant must reside in and/or be employed in Greene County, Pennsylvania
2. Applicant must be enrolled or accepted in an undergrad or grad program
3. The scholarship award must be used for tuition, fees or textbooks required for the course of study

APPLICATION INSTRUCTIONS

DEADLINE: RECEIVED IN CHAMBER OFFICE no later than 3:30 p.m. on Monday, April 1, 2019

Failure to follow the rules listed below will result in application being disqualified

1. Submit the completed "Scholarship Application" form
2. Submit verification of your enrollment in an accredited undergrad or grad program
3. Submit a list of your community involvement
4. Submit a narrative on how you have demonstrated leadership. One page, double spaced, 12 point font

The scholarship recipient will be notified in early May. Presentation will occur at the Chamber's Membership Luncheon, May 22, 2019 at Waynesburg University.

PLEASE SUBMIT COMPLETED APPLICATION TO:

Postal mail or Deliver - 3157 Mt. Morris Road, #103, Waynesburg, Pa 15370 Open M-F, 10am-4pm
The Chamber of Commerce is not responsible for lost, undelivered, late or incomplete applications.

QUESTIONS MAY BE DIRECTED TO 724-627-5926

SCHOLARSHIP APPLICATION

Name: _____ Email: _____

Home Address: _____

City: _____ Zip: _____ Phone: _____

Employer: _____ if applicable

I certify that the information submitted is, to the best of my knowledge, true and accurate. I understand falsification of information, or failure to provide information, may result in the termination of any scholarship granted. I understand that all decisions made by the judging panel are final and not subject to review or appeal. I further understand that any information provided in this form will be shared with the panel of judges and if selected to receive the scholarship all of the information in the application as well any photographs of me will be used for promotional purposes without further compensation or notification. The Dr. Nancy I. Davis Memorial Leadership Scholarship will be awarded without discrimination, including, but not limited to, race, color, religion (creed), gender, gender expression, age, national origin (ancestry), disability, marital status, sexual orientation, political affiliation or military status.

Applicant's Signature: _____ Date: _____

List your post-secondary education, include school(s), dates attended, date completed and any degree or certificate received, if applicable.

Where are you continuing your education? _____

Please provide verification of enrollment as an attachment to your completed application.

Planned Course of Study: _____

Career Goal(s): _____

How will this scholarship help you reach those career goals? _____

Does your employer provide financial assistance for higher education, if applicable? _____ Yes or No

Please explain: _____

Please provide a list of your community activities and involvement as an attachment to your completed application. This document should not be more than one page in length.

Please provide a narrative on how you have demonstrated leadership in the past as an attachment to your completed application. This document should not be more than one page in length, double spaced using 12 point font.