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## THE COMMUNITY FOUNDATION

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### DAVE CHAMBERLAIN MEMORIAL SCHOLARSHIP

**Purpose:** To provide financial assistance and encourage ongoing academic excellence beyond high school.

**Eligibility:** To be considered for this scholarship students must:

- Be on track to graduate from Evergreen, Heritage, Legacy, Mountain View or Union High Schools in June 2012
- Begin their post-secondary education, full-time, by Fall 2012. Preference will be given to those planning to enter the field of Communications or Technology
- Have demonstrated their commitment to both school and community

**Deadline:** Your application, letters of recommendation, official sealed transcript and other attachments must be received on or before **March 31, 2012.**

As you fill out this application, please think about what your career goals are, what your community means to you, and what you, as a citizen hope to offer to make your community a better place to live.

#### WHERE DO I SEND MY APPLICATION?

Please mail or hand-deliver one complete original application packet to:

Community Foundation for Southwest Washington  
Dave Chamberlain Memorial Scholarship  
1053 Officers Row  
Vancouver, WA 98661

If you have additional questions about this application, please contact:

Anne Digenis  
Donor Services and Grants Officer  
Community Foundation for Southwest Washington  
360.694.2550 or [Anne@cfsww.org](mailto:Anne@cfsww.org)

#### WHAT HAPPENS AFTER I SEND IN MY APPLICATION?

Information from the application and attached materials is reviewed by the scholarship committee. Recipients are selected by this committee and award letters are mailed to all recipients. Applicants who do not receive a scholarship are sent non-award notices.

**SECTION A - STUDENT INFORMATION**

**Name**

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**Address**

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**City and State** \_\_\_\_\_ **Zip Code** \_\_\_\_\_

**Telephone Number** \_\_\_\_\_ **E-mail Address** \_\_\_\_\_

**List school activities:**

**List academic achievements/honors:**

**List community involvement/service:**

**List employment history:**

<b>Employer</b>	<b>Position</b>	<b>From</b>	<b>To</b>	<b>Total Hrs Per Week</b>

**List your SAT and/or ACT scores and dates taken:**



## SECTION C - FAMILY INFORMATION

Father's Name \_\_\_\_\_

Is your father living?                      Yes                      No

Father's Occupation \_\_\_\_\_

Is your father employed?                      Yes                      No

Mother's Name \_\_\_\_\_

Is your mother living?                      Yes                      No

Mother's Occupation \_\_\_\_\_

Is your mother employed?                      Yes                      No

Do you live with your parents?                      Yes                      No

If not, with whom?

How many brothers/sisters do you have? \_\_\_\_\_

How many brothers/sisters are younger than you? \_\_\_\_\_

How many in your family will be in college next year? \_\_\_\_\_

**Unusual Circumstances: If applicable, please describe how and when any unusual family or personal circumstances have affected your achievement in school, work experience, or your participation in school and community activities.**

**How did you hear about this scholarship opportunity?**

Community Foundation Website ([www.cfsww.org](http://www.cfsww.org))

High School Counselor

TheWashBoard.Org ([www.thewashboard.org](http://www.thewashboard.org))

Other:

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## SECTION D - ATTACHMENTS

- An official, sealed transcript from the Evergreen School District high school from which you are graduating
- A copy of the college, university, vocation or technical school's standard fee schedule for Fall 2012
- Three letters of reference (only two from school personnel) addressed to the Dave Chamberlain Scholarship Advisory Committee
- A brief autobiography (no more than two pages) describing who you are as a person, your academic strengths and challenges, and your career objectives.

### CERTIFICATION:

I acknowledge decisions of the Scholarship Advisory Committee and the Community Foundation are final and that this is a competitive selection process.

I certify that the information provided is complete and accurate to the best of my knowledge. I understand that intentional misrepresentation is cause for disqualification of the **David Chamberlain Memorial Scholarship**. I understand that the scholarship advisory committee shall review information on this form and all attachments, and, if asked, I agree to provide proof of information I have given on this form.

I give permission for the scholarship advisory committee to contact my references and school officials for additional academic or character reference information.

If selected to receive a scholarship, I give permission for a publicity release, including the use of my name and photographic image.

**Applicant's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_