

The Vestavia Hills Chamber of Commerce Foundation Scholarship Guidelines

- A. The recipient will be a graduating senior who must have at least a 3.0 GPA with a minimum ACT/SAT Score of 20/1500.
- B. Financial need will be given strong consideration with a statement of need being required with the application.
- C. The student's major in college will be Business or related areas, such as Marketing, Accounting or Finance.
- D. The student should have exercised a positive influence upon his or her peers through leadership, character and service, and should be a responsible, conscientious student.
- E. Students may apply for this scholarship by completing an application, which can be obtained from your college counselor.
- F. The application should be returned to the college counselor by the date listed on the application form. The application should include:
 - (1) grade point average;
 - (2) two recommendations: (a) from a teacher in Social Studies or Business Education; and (b) a business or employment reference;
 - (3) evidence of significant community/church volunteer experiences; and
 - (4) a personal statement that would explain a significant work experience, either entrepreneurial or as a part of a team, that has had a major impact on the student's life and caused the student to choose business as a career.
- G. The recipient of the scholarship will be chosen by Board members of the Vestavia Hills Chamber of Commerce Foundation.
- H. The scholarship will be presented on Awards Day at Vestavia Hills High School. The check will be made directly to the school, college or university of the student's choice.

Vestavia Hills Chamber of Commerce
2018 Scholarship Application
Teacher/Reference Form
(PLEASE TYPE OR PRINT CLEARLY)

Name _____ Title _____

Classes taught/Firm _____ How Long _____

School/Business Address: _____

Student Name: _____

How long have you known this student: _____

Please give general comments on the student, including such things as dependability, leadership qualities, good citizenship and ability to get along with others. Use a separate sheet if necessary.
Do not write on the back.

Date: _____ Signature: _____

**(Please return this form in a sealed envelope to:
Vestavia Hills High School College Counselor, 2235 Lime Rock Road, Vestavia Hills, AL 35216)**

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