



Going Beyond Scholarship Program \$2,500 Scholarship

The Chamber Jeffersonsontown Adult Learner Scholarship Application

To be eligible for the Going Beyond Scholarship, applicants must meet the following criteria:

1. Currently employed by a business who is a member of The Chamber Jeffersonsontown
2. Must have a high school diploma or GED
3. Must be attending or planning on pursuing a degree at an accredited college or university within six months
4. Application, and required documents must be submitted to The Chamber Jeffersonsontown by **Friday, May 28, 2021**.

The Going Beyond Scholarships will be awarded to the recipients on **Wednesday, June 23, 2021** at a special breakfast event.

Applicant Name: _____ **DOB:** _____

Street Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Phone: _____ **Email address:** _____

Place of Employment: _____ **Number of hours worked per week:** _____

Street Address of Employer: _____ **City:** _____ **State:** _____ **Zip:** _____

1. Is your current employer a member of The Chamber Jeffersonsontown? Yes No

If you are unsure please visit the online Membership Directory: www.jtownchamber.com/membership/current-members

2. Are you currently enrolled in a college or university? Yes No

a. **If yes**, what college/university are you attending? _____

School Street Address: _____ City: _____ State: _____ Zip: _____

b. **If yes**, how many credit hours have you completed? _____

c. **If no**, what college/university do you plan to attend: _____

School Street Address: _____ City: _____ State: _____ Zip: _____

d. **If no**, Have you applied for admission? Yes No

Complete and return the application with the following to The Chamber Jeffersonsontown:

1. Proof of employment
2. Letter of recommendation from your current employer
3. 300 - 500 word essay on why you deserve to be awarded the Going Beyond Scholarship. Please include your educational and career goals, and how this scholarship will help you achieve those goals.

**Additional information may be required.*

Mail: 10434 Watterson Trail | Jeffersonsontown, KY 40299

Fax: 502-267-2070

Email: carolyn@jtownchamber.com

I certify that all of the information contained in my application form is accurate to the best of my knowledge. I understand that all submitted materials become property of The Chamber Jeffersonsontown.



Signature: _____

Date: _____