



Ozark Area Chamber of Commerce Community Involvement Program

- ⇒ **Are you a High School Junior or Senior?**
- ⇒ **Are you heading to Vocational or Technical School? Community College or a 4-year University?**
- ⇒ **Are you interested in serving your community?**

If so, then you may be eligible for our Community Involvement Program

- One participant will be awarded a one-time \$1,000 scholarship
- Application of participation must be submitted by June 16, 2022
- Ten (10) students will be chosen to participate in this program
- You must be a High School Junior or Senior
- You must attend Carroll High School, G.W. Long High School, Ariton High School, or a private school or be home schooled in Dale County
- Must have a verifiable 2.5 grade average
- Participation requires a commitment of 10 Chamber events which must be served during required time period. Events may include but are not limited to: attending chamber meetings and /or events, assisting in the chamber office, member visits, hands on assistance at participating businesses.
- Two of the required events will be soft skills training. A certificate will be presented to all participants at the completion of the requirements.
- Scholarship recipient will be randomly chosen from the participants that have met all of the requirements.

Ozark Area Chamber of Commerce
294 S. Painter Avenue, Ozark, AL
334-774-9321



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Please type or print your answers. If application is illegible it will not be considered.	
1. Last Name:	First Name:
Mailing Address:	Email:
Student's Phone #: ()	
Date of Birth:	
High School Presently Attending:	
Grade Point Average: GPA:	(On a 2.5 scale)
(Form will be provided for Guidance Counselor to verify)	
Anticipated Graduation Date:	
I will be attending the following school in the Fall of:	
School Name:	
Address:	
City, State, Zip	
Financial Contact Name:	
Proof of acceptance or current student enrollment from the above school is required prior to funds being released to school.	
What specialty/major do you plan to pursue?	
Name of Parents/Guardian:	Email Address:
Address of Parents/Guardian:	
Phone # of Parents/Guardian: ()	Alternate #: ()

Participation is on a voluntary basis. Participant must provide their own transportation to and from activities and events. I hereby agree that the Ozark Area Chamber of Commerce shall not be responsible for any loss or injury as a result of my participation in the Community Involvement Program. I further agree to hold the Chamber of Commerce harmless from any liability as a result of my actions while participating in the Community Involvement Program.

Student Signature

Date

Parent/Guardian Signature

Date