

2024-2025 Avon Chamber of Commerce Scholarship Activities Form



Name:

Ph.:

DOB:

Address:

Email:

Volunteer/Community Service <i>(This section is for activity outside of/not sponsored by your school.)</i>	Hours per Grade				
Responsibilities/Positions Held	9th	10th	11th	12th	Ttl Hours
					0
					0
					0
					0
					0
					0
					0
					0
					0
					0
Volunteer or Community Service Hours during High School TOTAL					0
High School Activities <i>(This section is for any activity done through your high school.)</i>					
Responsibilites/Position Held	9th	10th	11th	12th	Ttl Hours
High School Activity Hours during High School TOTAL					

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Work Experience (<i>In- or outside the home, during high school years.</i>)					
Responsibilities/Position Held					Ttl Hours
Work Experience Hours during High School TOTAL					