2025 - 2026 Scholarship Application

The Vermilion Chamber of Commerce is pleased to announce that a scholarship will be available to students in Vermilion Parish affiliated with the Vermilion Chamber of Commerce (See Chamber Connection section on the Scholarship Application Form). Scholarships are funded from generous donations of Chamber members.

Applications and supporting materials must be mailed or delivered to the Chamber office no later than 3:00 pm on Thursday, February 25, 2026. Interested applicants should mail their application, essay, and transcripts to: **Claire Broussard, Executive Director, Vermilion Chamber of Commerce, 1907 Veterans Memorial Drive, Abbeville, LA 70510.**

Criteria

- The applicant must be pursuing post-secondary education at either a two-year or four-year educational or vocational institution.
- The applicant must have completed at least one semester at the post-secondary education institution with a minimum of a 2.5 GPA.

Selection Process

- Applicants will be selected based on
    - Participation and leadership in school activities and work experience;
    - Response to the essay question;
    - Economic need; and
    - Academic achievement.

Notification

- Applicant selected to receive the scholarship will be notified during the second week of January 2024.
- Applicant and his/her parents will be invited to the 2026 Annual Installation & Awards Reception to be recognized as the recipient of the scholarship. If applicant is unable to attend the Installation & Awards Reception due to circumstances beyond his/her control, applicant must submit a letter in writing to the Executive Director citing the reason for the absence one week prior to the event, or the scholarship will be forfeited.

General Rules

All applications must be completed by the applicant. Applications may be submitted electronically and must be fully completed and signed to be considered. Incomplete or unsigned applications will not be reviewed.

The essay portion of the application should be clearly written, well organized, and submitted in a professional, easy-to-read format.

Applicants will be scored ten points for each of five categories—academics; economic needs; work experience; leadership, volunteerism, and extracurricular activities; and recommendations. The essay portion will account for fifty points.

Applications, including essays and supporting documents will become the property of the Vermilion Chamber of Commerce and will not be returned. By signing the application, you agree to allow the Vermilion Chamber of Commerce to utilize your name and essay for publicity opportunities related to the scholarship or Chamber program. Winning applicants agree to have their photograph taken with Chamber representatives and agree to release all rights to the photo to the Vermilion Chamber of Commerce for promotional activities.

Member Application

National companies may only send applications from local offices. This is a local scholarship for Vermilion Chamber of Commerce members. Applicants from outside this area who are not employees or family members of employees from your local office may be disqualified. Any student of parents who are employed by a Vermilion Chamber of Commerce member in good standing, or any employee or owner of a member in good standing are eligible to apply. Scholarships can be utilized for full or part-time tuition to any college undergrad or graduate program, for technical college or for community college.

Submissions Must Include All of the Following in One Package

- Application form completed.
- Essay as described on the application.
- Copy of transcripts/report cards showing last two years of grades and credits.
- Three completed recommendations in sealed envelopes.

Questions?

Call the Chamber of Commerce at 337-893-2491 or email info@vermilionchamber.org.
1907 Veterans Memorial Drive, Abbeville, LA 70510 ♦ www.vermilionchamber.org

Vermilion Chamber of Commerce
2025-2026 Scholarship Application Form

(Please Print or Type)

Part I

Name _____
Last First Middle Initial

Address _____
Address City Zip Code

Telephone _____ E-mail _____

High School Attended _____ GPA _____

Post Secondary School Attending _____ GPA _____

Application must include a copy of transcripts/report cards showing the last two years of grades and credits.

Planned Major/ Course of Study _____

CHAMBER CONNECTION

(Must be completed to be considered.)

Please check the line that is appropriate and provide information where required.

_____ I am a Chamber Member.

_____ I am the child or spouse of the following Chamber member.

_____ I am an employee of the following Chamber Member.

_____ I am the child or spouse of an employee of the following Chamber member.

Chamber Member Business Name (print) _____

_____ _____
Signature of Chamber Member Representative Date

EXTRA-CURRICULAR SCHOOL ACTIVITIES

Please complete in detail. List most recent first. Attach additional sheet if necessary

Organization/Activity	Positions Held	Years Involved	Leadership Role/ Honors/Awards

SCHOOL HONORS, AWARDS AND SCHOLASTIC ACHIEVEMENTS

Please complete in detail. List most recent first. Attach additional sheet if necessary

School	Award or Honor (Give Details)	Organization

WORK EXPERIENCE

(Include Volunteer Experience and Internships)

Please complete in detail. List most recent first. Attach additional sheet if necessary

Dates	Place of Business	Position	Reason for leaving	Accomplishments

Financial Need (Please describe your financial need for this award and how it will be used. Attach additional sheets if necessary.)

Describe any other scholarships or financial aid for which you have applied and identify scholarships you are receiving. (Attach additional sheets if necessary.)

Part II

Essay Question *(Response must be typed and be no more than 500 words in length, attached to this application.)*

If you were to return to your community after completing your education, how would you be involved in the community and what would you do to improve it?

Part III

Recommendation Form—(Submit 3 copies of the form.)

Three recommendations are required for completion of this application packet. The Committee requires that *one be from a school instructor*, *one from a Vermilion Chamber of Commerce member*, and *one from a community member familiar with your community and extracurricular activities*. It is very useful to the people you are using as references if you provide general information about this scholarship's criteria in written form along with your request to complete the recommendation form.

Do not open sealed recommendation envelopes.

Authorization for release of records: I hereby authorize the Vermilion Chamber of Commerce to release any information concerning my Academic Transcript and Scholarship Application to the Scholarship Committee and I permit the use of the information in the essay for use in publicity for the Vermilion Chamber of Commerce.

Applicant's Name (print) _____

Applicant's Signature_____ Date _____

RECOMMENDATION FORM

PLEASE NOTE: The applicant named below is applying for a scholarship administered by the Vermilion Chamber of Commerce. Your recommendation is needed as part of the application process. **Please return this form to the applicant in a sealed envelope with your signature across the flap so he/she may submit it as part of a complete package.** In addition to completing the form, you may also include a personal letter of recommendation (optional).

☐ School Instructor ☐ Chamber Member ☐ Community Member

Applicant's Name_____

How long have you known this individual? _____

In what capacity have you known this individual? _____

Circle the rating most applicable to the applicant on the following criteria using the scale:

(1) Below Average (2) Average (3) Above Average (4) Excellent (5) Outstanding

Goal Oriented	1	2	3	4	5
Prospect for Personal Success (career/personal)	1	2	3	4	5
Leadership Qualities	1	2	3	4	5
Responsibility/Reliability	1	2	3	4	5
Creativity/Resourcefulness	1	2	3	4	5
Extracurricular Involvement	1	2	3	4	5
Prospects for Academic Success	1	2	3	4	5

Remarks and general information concerning this individual you feel the selection committee should consider when screening this application, please elaborate on information provided. (Attach additional sheet(s) to elaborate.)

_____

_____

Name (print) Relationship to Applicant, if any

Name of Organization/Business Phone

Signature Date