# Chemung/Schuyler Municipal Clerks Association Lynn Collier Memorial Business Scholarship Award

#### Scholarship Application Eligibility Requirements

- The student <u>must</u> **RESIDE** in either Chemung or Schuyler County.
- The student must be a member of the Class of 2025 and plan to enroll at an accredited college, university, business, or technical school in the summer or fall of 2025 to study in the fields of BUSINESS or GOVERNMENT.

#### Instructions

- Please type or print <u>CLEARLY</u> in ink all information.
- The guidance counselor or principal should complete the attached recommendation and mail it along with the student's grade transcript and completed student application form to:

Tammy Stein Town of Elmira 1255 W. Water Street, Elmira, NY 14905

- All applications must be received by the close of business (4:30 p.m.) on April 11, 2025. Late applications will not be considered.
- 4. Each school will be notified of the Scholarship winners by May 2, 2025. The awards will be presented during a Chemung/Schuyler Municipal Clerks Association dinner meeting to be held on May 22<sup>nd</sup> (information regarding the time and location will be provided with the notification of the scholarship winners). The winning students and one guest each are encouraged to attend the dinner. Additional guests may attend at their own expense. If unable to attend, we will forward the award to the high school for presentation at a school awards ceremony or at graduation.
- One scholarship will be given to a student RESIDING in Chemung County and to one student RESIDING in Schuyler County.

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### Recommendation Form

#### PRINT CLEARLY

Please complete and return with the student's grade transcript to the attention of: Tammy Stein, Town Clerk, Town of Elmira 1255 W. Water Street, Elmira, NY 14905. It must be in her office no later than 4:30 p.m. on April 11, 2025.

## Chemung/Schuyler Municipal Clerks Association Lynn Collier Memorial Business Scholarship Award

#### Student Application Form

#### PRINT CLEARLY

Please complete and return to your Guidance Counselor
Name of applicant
Address
CountyTown
High School
Father/Guardian Name
OccupationEmployer
Mother/Guardian Name
OccupationEmployer
Number of brothers and sisters
What are some of your interests, include any part-time employment
Have you been formally accepted
What major and degree will you pursue
What are your career goals following completion of your education
Please let us know why you are requesting this scholarship
SignatureDate