Financial Assistance Application (One Year Only), Spring 2026

This is the readable version of the PDF. The official PDF is the one to fill in and return.

McMinnville Area Chamber of Commerce logo: a black square with a white stylized “MAC” monogram, above the words “McMinnville Area Chamber of Commerce.”

(One Year Only) Spring 2026

McMinnville Area Chamber of Commerce has limited funds available for tuition assistance grants to students in the McMinnville, Amity, Dayton, Sheridan, Willamina and Yamhill/Carlton areas. These funds are to be used toward tuition costs at any accredited college, university, community college, trade or vocational school.

Upon verification of the student's registration as a full-time student, payment will be made jointly to the student and the school. The funds must be applied toward payment of tuition costs for the school year immediately following the date the award is announced. Awards offered, but not verified by December 31 of the year during which the award was granted, will be withdrawn.

Qualifications for tuition assistance will be determined by the Chamber's Scholarship Selection Committee according to the financial need, personal character, service-mindedness, academic record and the sincere interest of the student to pursue further education. Decisions of the selection committee are final.

The Chamber's tuition assistance grant is not intended to finance the student's entire program, however may help reduce dependence upon part-time work or student borrowing.

Careful and detailed completion of this application form is important. Answers to questions, or any other information furnished by the student in this application, or in any subsequent interview by the selection committee will be held in strict confidence by the Chamber.

This application must be returned to your high school counseling office on or before Friday, April 10, 2026.

McMinnville Area Chamber Scholarship Application

Please use additional pages to answer questions if needed.

Applicant's Name: Last (blank) First (blank) Middle (blank)

Gender: □ M □ F □ NB

Date of Birth: Month (blank) Day (blank) Year (blank)

Home Phone: (blank) Cell phone: (blank)

Home Address: (blank)

E-mail Address: (blank)

What college are you planning to attend? (blank)

Proposed major field of study: (blank)

Have you been accepted by the college of your choice? □ Yes □ No

Name of college: (blank) Reason for choosing this college: (blank)

While attending college, do you plan to live at: □ Home □ On campus □ Off campus but not at home □ Greek Housing

What do you plan to do the summer before school begins (work, travel, etc.)? (blank)

What did you do last summer (work, travel, etc.)? (blank)

Did you participate in Lemonade Day McMinnville? (circle one) Yes No

If yes, when? (blank)

In a few words tell us about your experience and what you learned. (blank)

Is there anything else we should know about you that is not reflected in this application? (blank)

Personal character and talents

What are your strong points? (blank)

Career and personal life goals

How do you picture yourself five/ten years from now? (blank)

Family information

If you have a step-parent or guardian, please indicate and give information requested.

Parent/Guardian: (blank) Phone: (blank)

Home address: (blank)

E-mail: (blank)

Employer: (blank)

Occupation or position: (blank)

Parent/Guardian: (blank) Phone: (blank)

Home address: (blank)

E-mail: (blank)

Employer: (blank)

Occupation or position: (blank)

If parents are separated or either one is deceased, indicate here: (blank)

Siblings

Name	Age	School/employer	Dependent on family? (Yes or No)
(blank)	(blank)	(blank)	(blank)
(blank)	(blank)	(blank)	(blank)
(blank)	(blank)	(blank)	(blank)

Siblings table with columns Name, Age, School/employer, and Dependent on family (Yes or No). Three blank rows to fill in.

Other persons dependent on the family

Name	Age	School/employer	Dependent on family? (Yes or No)
(blank)	(blank)	(blank)	(blank)

Table of other dependent persons with columns Name, Age, School/employer, and Dependent on family (Yes or No). One blank row to fill in.

Other pertinent family information: (blank)

Please include the following with your application:

- A cover letter providing a succinct personal history, your future plans and aspirations (including how a college degree will help you achieve these goals) and one thing about you that is not already reflected in your transcript or resume.
- Your resume (including work history, activities and honors)
- A copy of your high school transcript
- A list of scholarships and financial aid you have applied for, and if any have been already awarded

I hereby certify that:

1. I plan to be a full-time student as established by the college or school.
2. The information contained in the application is true and correct to the best of my knowledge.

Signature: (blank) Date: (blank)

I have read this application and hereby certify that the information is correct and submitted with my approval.

Signature of Parent/Guardian: (blank) Date: (blank)

Financial information

The principal criterion for a McMinnville Chamber scholarship is financial need. The information requested on this page will assist the Committee in making an informed judgment about your need for a scholarship.

I. Family finances

Please copy this information from your 2024 Form 1040.

Total number of exemptions claimed (blank)

Line 2b Taxable interest $(blank)

Line 3b Ordinary dividends $(blank)

Line 15 Taxable income $(blank)

II. First-Year Budget Information

College web pages usually have this information.

First-year budget: estimated income and estimated expenses

Estimated income, 1st year	Amount	Estimated expenses	Amount
1. Student's current savings	$(blank)	1. Tuition & fees	$(blank)
2. Student's summer earnings	$(blank)	2. Room & board	$(blank)
3. Student's earnings during 1st year of college	$(blank)	3. Books & supplies	$(blank)
4. Parent's contribution for the 1st year	$(blank)	4. Living expenses	$(blank)
5. Financial assistance offered by college	$(blank)	5. Other expenses	$(blank)
6. Grants & scholarships (from other sources)	$(blank)		
7. Other expected income	$(blank)		
Total first year income	$(blank)	Total expense	$(blank)

First-year budget with estimated income items 1 to 7 and their amounts on the left, estimated expense items 1 to 5 and their amounts on the right, then total first year income and total expense. All amounts are blank to fill in.

Additional Income Needed (A-B=C) $(blank)

If you are planning to take out loans to help pay for college, please list the name of the loan provider and the amount of each loan: (blank)