



Eastham

chamber of commerce

Eastham Chamber of Commerce Betty Fleming Memorial Healthcare Scholarship

Committee: Members of the Eastham Chamber of Commerce Scholarship Committee

Award: \$1,000 Scholarship

Eligibility for Eastham Chamber of Commerce Scholarship:

- Resident of Eastham
- Accepted by or currently enrolled in a two- or four-year college or university either in the nursing program or any accredited healthcare program.
- Currently employed or has been employed by a local business (preferably one that is a member of the Eastham Chamber of Commerce) or the Town of Eastham. Most local businesses are members. Please ask your current or previous employer for confirmation or reach out to the Eastham Chamber of Commerce at (508) 240-7211.
- Graduating high-school senior or current full-time college student with a minimum overall 2.5 GPA.

Submission Requirements:

- Completed application
- Academic Transcript
- Personal essay that includes impact your work history in the local community has had on your development and preparedness for your higher education. Also include information about why you have selected the healthcare profession for your continuing education, your career goals, interests, activities, awards and honors.
- Two Letters of Recommendation –
 - One from a school faculty member
 - One from a local businessperson, preferably a Member of the Eastham Chamber of Commerce, for whom you worked

Application: Completed application and attachments must be received by the Eastham Chamber of Commerce, P.O. Box 1329, Eastham, MA 02642 not later than March 1.

Payment: Payments directly to the recipient upon completion of the semester following the notice of this award, and proof of a minimum overall 2.5 GPA, and of continued enrollment or completion of the degree program.



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Betty Fleming Memorial Healthcare Scholarship Application

Name _____ Date of Birth _____

Physical Address _____ Phone _____

Mailing Address _____ Personal (not school) Email _____

The name of a local business where you currently or have been employed by and the amount of time employed:

School currently attending _____

Parent's/Step-parent's name _____ Occupation _____

Address _____

Additional Parent's/Step-parent's name _____ Occupation _____

Address _____

Name of school and location (city/state) to which you were accepted _____

CHECKLIST:

- Application
- School Transcript
- Essay
- Academic Letter of Recommendation
- Employer Letter of Recommendation

Signature _____ Date _____

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