

***Dr. Robert Carver Bone Scholarship***  
***Sponsored by Lebanon/Wilson County Chamber of Commerce***  
***Education Foundation Scholarship***

Eligibility requirements

- Student must be an entering as full-time freshman residing in Wilson County
- Student must have a minimum ACT score of 20 or SAT of 1060
- Student must have a minimum GPA of 3.0 on a 4.0 scale
- Student must be accepted to Cumberland University
- Student must submit the Free Application for Federal Student Aid (FAFSA)
- Student must submit the requested information on or before the specified deadline

Students please provide the requested information in the following order:

1. Completed application
2. Essay (limited to two (2) pages) to include:
  - a. Why you wish to attend Cumberland University
  - b. Why this scholarship is important to you
  - c. Why you deserve this scholarship
  - d. Any special considerations you wish the committee to consider
3. Letter of intent to attend Cumberland University specifying beginning Semester
4. Transcripts verifying Grade Point Average (Transcripts should be from all schools attended)
5. Copy of ACT results
6. Copy of FAFSA
7. Signed release of information to Cumberland University
8. Two letters of reference from teacher or guidance counselor

Application Procedures

1. Application completed and returned to the Lebanon/Wilson Chamber of Commerce Office by 4:00 pm on Friday, April 14, 2006.
2. Committee review applications by April 28, 2006 and choose three finalists.  
Candidates not selected notified by mail. Finalists notified by phone.
3. Interview will take place at Chamber of Commerce office.  
Candidates notified of decision upon completion of all interviews.
4. Vice-Chairperson of Lebanon/Wilson County Chamber of Commerce Education Division will serve as Committee Chair.
5. Members of Committee will be appointed by Committee Chair.
6. Scholarship check written to Cumberland University on behalf of winner.  
Money deposited in student account will be for tuition/books purposes only. Student cannot use scholarship monies any purpose other than those specifically states.

*Dr. Robert Carver Bone Scholarship  
Lebanon/Wilson Country Chamber of Commerce  
Education Foundation Scholarship*

1. Full Name \_\_\_\_\_ Date \_\_\_\_\_
  2. Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_
  3. Address \_\_\_\_\_  
\_\_\_\_\_
  4. Phone Number (    ) \_\_\_\_\_
  5. Have you graduated or will you graduate prior to the Cumberland University Semester for which support is requested?     Yes     No
  6. Have you been or will you be accepted by Cumberland University prior to Semester for which funding is requester?     Yes     No
  7. Grade Point Average \_\_\_\_\_ ACT or SAT composite score \_\_\_\_\_
  8. Please list all Honors and/or Advanced Placement Courses you have taken or are Currently enrolled.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  9. Have you requested financial support from other sources?     Yes     No  
Please list (Use back of application in additional space is needed)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  10. Please list Volunteer/Community Service/School Sponsored Activities  
(Use back of application in additional space is needed)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  11. Do you work outside the home?     Yes     No
  12. Employer \_\_\_\_\_ Hours per week \_\_\_\_\_
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Release of Information

I, \_\_\_\_\_, agree to allow the Chamber of Commerce Scholarship Committee to have access to my records at Cumberland University to verify information pertinent to the scholarship process.

\_\_\_\_\_

Student Name (Printed)

\_\_\_\_\_

Student Signature

\_\_\_\_\_

Date

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