



# Class Scholarship Application



Faribault Area  
**CHAMBER OF COMMERCE**  
*and Tourism*

Name: \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Employer \_\_\_\_\_

This scholarship covers half of the full tuition cost.

- Deadline for applications is June 30
- The selection is the responsibility of the Faribault's Future Facilitator and Coordinator

The payment of the remaining half is due by the first day of class.

\_\_\_\_ Small Business

\_\_\_\_ Local Non-Profit Organization

In the space below please indicate why the scholarship is needed. This form must be accompanied by a class application.