Bridgeview Chamber of Commerce & Industry

7300 W. 87th St. (Bridgeview Bank Bldg.), Bridgeview, IL 60455
TEL (708) 598-1700 / FAX (708) 598-1709
info@bridgeviewchamber.com
~ www.bridgeview-il.gov/chamber~

Scholarship Instructions & Qualifications

Please complete this application in its entirety in order to be considered by the Bridgeview Chamber of Commerce & Industry's Scholarship Committee. All required supporting documentation must accompany this application at time of submission to the Chamber, (do not submit separately). **The entire application must be received by the Bridgeview Chamber on or before the deadline of Tuesday, May 13th, 2014.** The mailing address is indicated at the top of this letterhead or you can drop it off in person.

Scholarship winners will be contacted by Friday, May 30th, 2014. Scholarship winners will be invited to a special ceremony that will be held at the June 10th, 2014, Board Meeting at Mama Luigi's, where they will be presented with their scholarship awards.

The Scholarship Committee will base award decisions on the following criteria (A-E):

A. Current resident of Bridgeview, IL for at least one (1) year, or

If applying under the criteria of employee or employee's dependent, the following must be relevant:

- Employed by a Bridgeview Chamber Member Company as of 12/31/13, (Payroll stub or payroll record required for proof).
- Member Company must be a current member in good financial standing with the Bridgeview Chamber of Commerce & Industry as of 03/01/14.

B. Financial need/academic performance.

1. Financial Documents Required: Application signed by Parent or Guardian.

2. Official School Transcript: Copy of official transcript from your school.

C. Must currently be enrolled, or accepted to, an accredited University, College or Community College.

D. Must show interest in outside academic activities, (School/Community Clubs, offices held, awards, etc.)

E. Consideration given to interest in Chamber & Chamber fundraisers.

NOTE: Winners check will be written to the School and to the Student.

Bridgeview Chamber of Commerce & Industry

7300 W. 87th Street, Bridgeview, IL 60455
TEL (708) 598-1700 / FAX (708) 598-1709
info@bridgeviewchamber.com
~ www.bridgeivew-il.gov/chamber~

2014 SCHOLARSHIP APPLICATION

Name: _____
(Last) (First) (Middle)

Permanent
Address: _____ Phone: _____
Number & Street City Zip

IF APPLYING UNDER THE CRITERIA OF IMMEDIATE FAMILY MEMBER OF A BRIDGEVIEW CHAMBER MEMBER COMPANY, THE COMPANY NAME AND EMPLOYEE NAME MUST BE INDICATED BELOW:

Company: _____ Phone: _____

Employee: _____ Relationship: _____

EDUCATIONAL INFORMATION

1. Last high school attended:

_____
Name City, State Dates: From/To

2. Anticipation date of completion, (or have completed), High School:
_____

3. List special interests, activities, honors, awards, offices held, etc:

_____ _____

_____ _____

_____ _____

4. Indicate your class rank: _____. (ex: 25th in a class of 400)

5. Indicate your cumulative grade point average, (ex: 2.75 / 4.00): _____.

6. Indicate the University, College, or Community College you will be attending:

_____
Name, Address City, State Zip Code

7. Check the proper category which applies to your situation:

_____ I have been accepted at: _____

_____ I have attended from _____ to _____ and have completed _____ semester hours.

8. Will you be attending at Full-time status, (12 credit hours or more)? Yes _____ No _____

9. Indicate your major field of study: _____

10. List all community service hours completed. #hrs_____ Where? When?

_____

_____

_____

11. Explain your qualifications for a scholarship and/or financial need:

_____

_____

_____

_____

_____

12. Scholarship/Grant Application Information:

– List all Scholarships you have applied for; & Note Scholarships you have received or will be receiving.
– List all Grants applied for; & Note Grants you have received or will be receiving.

_____Received(Y /N) In Processes (unknown)

_____Received (Y /N) In Processes (unknown)

_____Received (Y /N) In Processes (unknown)

_____Received (Y /N) In Processes (unknown)

_____Received (Y /N) In Processes (unknown)

_____Received (Y /N) In Processes (unknown)

13. Explain your career plans:

_____

_____

_____

_____

_____

APPLICANT'S PERSONAL INFORMATION

14. Date of birth: _____/_____/_____

15. I am a legal resident of: _____ (City) _____ (State)

16. Marital status: _____ Married _____ Single

17. I have _____ children Indicate Ages: _____/ _____/ _____/ _____/ _____/

18. Spouse's Name: _____

19. Spouse's Occupation: _____Employer_____

20. Spouse's 2012 Gross Income: _____

21. Indicate Employment History, (Current and Previous Employment Information):

Date Employed	Nature of Work	Employer

22. If presently employed, indicate the following:

_____ Hours Worked Per Week $_____ Monthly Income $_____ Gross Income/Year

23. Father or Guardian Name: _____

Address: _____
Number Street City State Zip

Occupation: _____ Employer: _____

Years employed by the Employer: _____ Yearly Gross Income: _____

24. Mother or Guardian Name: _____

Address: _____
Number Street City State Zip

Occupation: _____ Employer: _____

Years employed by the Employer: _____ Yearly Gross Income: _____

25. Indicate the number of dependent children in the family, (not including yourself): _____

List the ages of these dependent children: _____/ _____/ _____/ _____/ _____/ _____/

26. List any circumstances, expenses, or debt for the Scholarship Committee to consider:

_____

_____

_____

27. Indicate any additional information you would like the Scholarship Committee to consider:

_____

_____

_____

Before submitting your application, be sure to verify that all questions are answered. If answers do not fit in the space provided, you may submit additional information on a separate page. Be sure to attach it to the application.

APPLICATION CONFIRMATION STATEMENT

I AFFIRM THE CORRECTNESS OF THE FOREGOING ANSWERS AND INFORMATION THAT I HAVE PROVIDED ON THIS APPLICATION AND SUPPORTING DOCUMENTATION. I UNDERSTAND THAT ANY FALSE INFORMATION MAY DISQUALIFY ME FROM CONSIDERATION AND VOID MY APPLICATION.

_____ _____

Signature of Applicant Date

I HAVE READ THE FOREGOING APPLICATION IN ITS ENTIRETY AND HEREBY STATE THAT TO MY KNOWLEDGE IT IS ACCURATE AND COMPLETE WITH THE REQUIRED INFORMATION.

_____ _____

Signature of Parent or Guardian Date

ALL supporting documentation must be provided for the consideration of the Scholarship Committee. ALL documents are required with the submission of this application.

1. Certified transcript of Grades from both High School(s) and/or College(s) through 2013.

COMPLETED APPLICATION MUST BE RECEIVED BY TUESDAY, MAY 13, 2014.