



2020 Glenwood Senior Scholarship Application

Applications must be postmarked by March 27, 2020.

320 N. Main Plaza

Chatham, IL 62629

(217) 483-6450

coordinator@chatham-il-chamber.com

www.chatham-il-chamber.com

Scholarship Application

- Every question must be answered, if you think a question does not apply to you, mark “N/A” in the space.
- If this application contains any blank spaces, other than the sections marked “optional,” it will be considered incomplete and will not be accepted.
- We recommend that applicants make a full copy of the completed application and all supporting documents before submitting the application. The Chamber cannot be responsible for incomplete application packages.

The applicant will be judged on a combination of academic achievement/volunteer-work experience/and future goals. The goal of the Chamber is to promote business within the community. Please keep this in mind while completing the application.

SECTION 1 – PERSONAL INFORMATION

First Name: _____ Middle Initial: _____ Last Name: _____

Permanent Address: _____

City: _____ County: _____ State: _____

Zip: _____ Phone Number: _____ Email: _____

SECTION 2 – SCHOOL INFORMATION

2A CURRENT SCHOOL INFORMATION

_____ **Yes**, I am a student eligible for 2020 graduation at Glenwood High School in Chatham and would be able to provide documentation upon request.

Picture:

_____ **Yes**, if I become a scholarship recipient, I agree to have my picture and information released to promote the Chatham Area Chamber of Commerce Scholarship Program and consent to it being used.

Cumulative GPA: _____ (out of 4.0 _____ or _____) please indicate if GPA is not based on a 4.0 scale.

2B TRANSCRIPTS

Applicants are required to provide transcripts for the most recent three (3) semesters. Transcripts should be official or unofficial with a school seal.

_____ **Yes**, I have provided three semesters of high school transcripts

SECTION 3 – ACTIVITIES, HONORS & ACHIEVEMENTS

Please use this section to indicate activities; honors and special achievements. Use additional paper as necessary. A resume may NOT be submitted instead of providing the information below.

3A. EXTRACURRICULAR ACTIVITIES (e.g., clubs, sports)

1. _____
2. _____
3. _____
4. _____

3B. VOLUNTEER ACTIVITIES (at school, work, or other)

1. _____
2. _____
3. _____
4. _____

3C. AWARDS/SPECIAL RECOGNITION RECEIVED (e.g., Honor Society, Dean's List, Employee of the Month)

1. _____
2. _____
3. _____
4. _____

3D. LEADERSHIP/OFFICER POSITIONS (e.g., captain of team, class or club president)

1. _____
2. _____
3. _____
4. _____

SECTION 4 –WORK EXPERIENCE

Please list any volunteer/work experience (starting with most recent). Feel free to use additional paper as necessary. A resume may NOT be submitted instead of providing the information below.

I have not had any volunteer/work experience: _____

1. Company: _____ **Position Held:** _____

City: _____ **State:** _____ **Zip:** _____

Start Date (month/year): _____ **End Date:** _____

This experience was: Paid: _____ **Volunteer:** _____ **Hours worked per week:** _____

Contact Person: _____

Contact's Title: _____ **Phone Number:** _____

2. Company: _____ **Position held:** _____

City: _____ **State:** _____ **Zip:** _____

Start Date (month/year): _____ **End Date:** _____

This experience was: Paid: _____ **Volunteer:** _____ **Hours worked per week:** _____

Contact Person: _____

Contact's Title: _____ **Phone Number:** _____

3. Company: _____ **Position held:** _____

City: _____ **State:** _____ **Zip:** _____

Start Date (month/year): _____ **End Date:** _____

This experience was: Paid: _____ **Volunteer:** _____ **Hours worked per week:** _____

Contact Person: _____

Contact's Title: _____ **Phone Number:** _____

SECTION 5 – RECOMMENDATIONS

Applicants are required to provide two personal/business recommendations. Please have the individuals submitting referrals on your behalf complete the following information.

REFERRAL #1

How do you know the applicant? _____

How long? _____

Please rate the applicant	Above Average	Average	Below Average	Unknown
Interpersonal communication skills				
Demonstrates initiative				
Performance under stress				
Self-confidence				
Responsibility and reliability				
Ability to accept constructive feedback and learn from it				
Attendance and timeliness				
Potential for growth				

Please submit any additional information you would like to share about the student on a separate page.

Signature of
Recommender _____ Date _____

Name of Recommender _____ Phone _____

Organization _____ Title _____

Street Address _____ City _____ State _____ Zip _____

REFERRAL #2

How do you know the applicant? _____

How long? _____

Please rate the applicant	Above Average	Average	Below Average	Unknown
Interpersonal communication skills				
Demonstrates initiative				
Performance under stress				
Self-confidence				
Responsibility and reliability				
Ability to accept constructive feedback and learn from it				
Attendance and timeliness				
Potential for growth				

Please submit any additional information you would like to share about the student on a separate page.

Signature of
Recommender _____ Date _____

Name of Recommender _____ Phone _____

Organization _____ Title _____

Street Address _____ City _____ State _____ Zip _____

SECTION 6 – ESSAY

With your application, please include your response to the following essay question. Essay must be on a separate piece of paper and must have your name and the essay question typed/printed at the top of the page.

In 200 words or less, please tell us why you feel you should receive a Chatham Area Chamber scholarship and describe your economic need for this scholarship.

SECTION 7 – CONCLUSION & REQUIRED SIGNATURE

7A. I HAVE INCLUDED THE FOLLOWING AND WILL POSTMARK MY APPLICATION BY March 27, 2020.

____ Application	____ Copies of honors and achievements
____ Three (3) semesters of transcripts	____ Essay (per section 6)
____ Two (2) signed recommendations	

7B. PLEASE READ THE FOLLOWING PRIOR TO SIGNING BELOW:

To the best of my knowledge, I have provided the Chatham Area Chamber of Commerce accurate information concerning all questions on this application. I hereby agree to report to the Chatham Area Chamber of Commerce any changes which could affect consideration of my application.

I understand that all decisions of the Chatham Area Chamber of Commerce Scholarship Committee are final. I understand that if I am awarded a scholarship, certain requirements (including, but not limited to the following) must be met before any award monies can be disbursed. (1) I must accept the award. (2) I must provide proof of enrollment (full or part-time with a 6 credit hour minimum) in an accredited program for the academic year. I understand that awards will be payable and mailed directly to my college/university in the amount of \$1000. In order for us to process your scholarship, we must receive information on your schools letterhead showing your grades, enrollment in the school, or an invoice.

Applicants Signature	Print Name	Date
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Parent/Guardian Signature	Print Name	Date
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SECTION 8 – OTHER INFORMATION