February 6, 2019

Good Morning:

The Alsip Chamber of Commerce and the Alsip Industrial Association are pleased to begin taking applications for our 2019 Scholarship awards. To date over $184,000 has been awarded from The Alsip Chamber of Commerce/Alsip Industrial Association Scholarship Fund.

We are asking for help this year to make your Alsip students aware of this program. Our 2019 application is available at www.alsipchamber.org or www.alsipindustrial.com

Completed applications must be received at the address listed above, with all required material no later than 3:00 p.m. on Thursday, April 25, 2019.

Winners will be notified in early July.

Thanks for your help in passing along this information to your students.

If we can be of assistance to you or your students, please let us know.

Sincerely,

THE ALSIP CHAMBER OF COMMERCE

Marigrace Sinnott-Snooks

Executive Director

MS/kp
ALSIP CHAMBER OF COMMERCE
ALSIP INDUSTRIAL ASSOCIATION
EDUCATIONAL SCHOLARSHIP

Mail or deliver to:
Alsip Chamber of Commerce
12159 South Pulaski Road
Alsip, Illinois 60803
(708) 597-2668

2019
SCHOLARSHIP APPLICATION

THE FOLLOWING DOCUMENTATION MUST BE INCLUDED
WITH YOUR COMPLETED SCHOLARSHIP APPLICATION
FORM.

1. COPIES OF ALL TAX RETURNS (FIRST PAGE) FOR STUDENTS AND PARENTS.
2. CERTIFIED TRANSCRIPT OF GRADES-HIGH SCHOOL AND/OR COLLEGE.
3. PROOF OF EMPLOYMENT BY AN AIA or ACC MEMBER COMPANY (letter
   from the employer and a copy of employee’s W-2), if applicable.
4. PHOTOCOPY OF YOUR DRIVER’S LICENSE OR STATE-ISSUED PHOTO I.D.
5. LETTER OF RECOMMENDATION.

SCHOLARSHIP APPLICATIONS MUST BE RECEIVED AT
12159 S. Pulaski Road, Alsip
April 25, 2019  3:00 P.M.

No applications will be accepted after this deadline.

IF YOU NEED ADDITIONAL SPACE TO ANSWER ANY OF THE
FOLLOWING QUESTIONS, YOU MAY COMPLETE THE INFORMATION
ON A BLANK SHEET AND ATTACH IT TO THE APPLICATION.
2019

ALSIP SCHOLARSHIP PROGRAM

The Alsip Industrial Association (AIA) and Alsip Chamber of Commerce (ACC) administer a Scholarship Program to aid high school graduates who exhibit a commendable work ethic and level of ambition, and could benefit from additional financial help for post-secondary education.

The program is equally open to high school seniors or graduates who are either Alsip residents or employees or children of employees of companies that are members in good standing of the Alsip Chamber of Commerce or Alsip Industrial Association. For a non-resident to qualify through their employer, an employee must work at the Alsip location or, if the member firm has no physical presence in Alsip, at the firm’s location closest to Alsip. One of these criteria must be met at the time of application and at the time of the award. Proof of either is required. An applicant must be a prospective high school graduate, or an earlier high school graduate entering an adult continuing-education program, who will be attending school full time to obtain a college/university degree or trade school degree/ certification from an accredited post-secondary school.

If pursuing a college degree, students must enroll in a full-time academic program with 12 credit hours or more, or the equivalent, for the upcoming academic year.

If applying to an accredited trade school, the student must enroll in the school’s full time training program approved by the ACC and AIA, and meet all of the school’s requirements.

If school plans such as major, number of hours attending, or choice of school change or are delayed, between the times of application and enrollment, the application will be re-evaluated and the award may change or be withdrawn.

A successful applicant must show evidence of ambition and a strong work ethic and is encouraged to clearly demonstrate both a need for financial assistance, and enthusiasm to begin or continue post-high school training at the accredited university, college, or trade school.

Applicants who will receive financial support for their continuing education from parents or guardians must include copies of the first page of each supporting parent or guardian’s most recently submitted federal tax return. This should include the tax return of the parent or guardian
who claims the applicant as a dependent for income tax purposes, if applicable. Applicants' own federal tax return and form W-2(s) should also be included with the application if applicable.

Certified high school transcripts are required for application. A letter of recommendation from a high school teacher, employer, clergyperson, or other professional must accompany the application. ACT or SAT scores are not required to be submitted.

A photocopy of the applicant's driver's license or other government-issued photo ID must be included. Non-residents of Alsip who are eligible through their own or a parent's or guardian's employment with a company belonging to the AIA or ACC must submit evidence of current employment with that firm.

Information about the scholarship program will be publicized in local papers and in Chamber, Industrial Association, and Village newsletters. Information about the program will be distributed to local private high schools and to public high schools that serve Alsip. In addition the information will be sent to the trade schools in Alsip; other schools may contact us if they are interested.

In the event that any required information is found to be missing from submitted application packets, one reasonable attempt will be made to follow up with the applicant. If neither the required documentation nor an acceptable reason for its omission is then provided by the applicant, the application will be disqualified from consideration. Applications received after the deadline date will not be reviewed. All documentation submitted will become the property of the sponsoring organizations and will not be returned.

**APPLICATION REVIEW PROCESS**

Applications will be reviewed by a committee, which is comprised of representatives from the business and educational communities.

The members of the Scholarship Review Committee are approved by the ACC and AIA as follows:

2 Business representatives belonging to and selected by the ACC.

2 Business representatives belonging to and selected by the AIA.
1 Qualified representative who is a member of neither the ACC nor the AIA, who has experience as a teacher or school administrator, and who is selected by ACC/AIA.

All completed application packets must be received by Thursday April 25, 2019 3:00 PM. An initial review by a member of the Scholarship Review Committee against a checklist will determine whether all required materials are included and in good order. If any omissions are discovered, a member of the committee will attempt to contact the applicant to request the missing item(s). Any applications that cannot be made complete through this process, and where no acceptable explanation for the failure to provide missing items is provided, will be disqualified.

Copies will be made of all complete application packet materials received, and distributed only to the five Scholarship Review Committee members/ judges.

Each Committee member will review each application and give the applicant a numerical rating between 1-10, one being the poorest rating, ten being the best. The scores of the five judges will be added together to arrive at a total score for each applicant. The application(s) with the highest number of total points will be selected for a scholarship.

In the case of a tie (i.e. one scholarship left, but two or more applicants with the same score), the recipient will be determined by a majority of votes by the five-person Scholarship Review Committee.

The quantity and dollar amount of scholarship awards will depend on funds available and the joint decision of the four Scholarship Review Committee members who are members of either the AIA or the ACC.

Scholarship money will be issued directly to the student after copies of 1) a letter of acceptance for the educational institution, and 2) the student's personal Fall term class schedule, are received in the Chamber office.

All awards not claimed by December 31st of the scholarship year will be forfeited.
2019
SCHOLARSHIP APPLICATION

NAME __________________________________________
     Last     First     Middle

PERMANENT
ADDRESS _________________________________________
     City     State     Zip

PHONE ____________________________

IF APPLYING UNDER THE CRITERIA OF AN EMPLOYEE OF ALSIP CHAMBER OR ALSIP
INDUSTRIAL ASSOCIATION MEMBER, PLEASE GIVE NAME OF COMPANY & EMPLOYEE.
To qualify an employee must work at the Alsip location or in the case of a member
outside of Alsip, at that location only.

EDUCATIONAL BACKGROUND

1. LAST HIGH SCHOOL ATTENDED:

______________________________________________________________________
Name     City     State     Dates - From/To

2. DATE OF HIGH SCHOOL COMPLETION __________________________

3. LIST SPECIAL INTERESTS, ACTIVITIES, HONORS, AWARDS, OFFICE HELD, ETC:

_______________________________________________________________________

_______________________________________________________________________

4. WHAT IS YOUR RANK IN CLASS _________ (EXAMPLE: 25 in a Class of 400)

5. WHAT IS YOUR CUMULATIVE GRADE POINT AVERAGE? _________
GRADE POINT AVERAGE IN A _________ POINT SYSTEM. (4.0, 5.0)
   If college or trade school plans such as major, hours attending, etc.,
   change between application and enrollment, the application will
   be re-evaluated and award may change or be withdrawn.

6. WHAT COLLEGE, CAREER OR TRADE SCHOOL DO YOU PLAN TO ATTEND?

______________________________________________________________________
Name     Address     City     State

7. WHAT IS YOUR MAJOR FIELD? _______________________________________

8. WILL YOU BE ATTENDING FULL TIME FALL 2019 (12 CREDIT HRS OR MORE)? _____
9. PLEASE CHECK:
   _____ I HAVE APPLIED FOR ADMISSION   _____ I HAVE BEEN ACCEPTED
   _____ I HAVE ATTENDED FROM _______ TO _______

   AND HAVE COMPLETED _______ SEMESTER HOURS.

10. DO YOU PLAN TO LIVE: _____ ON CAMPUS; _____ AT HOME; OR
     _____ IN OFF-CAMPUS HOUSING? WHAT IS THE REASON FOR YOUR DECISION?

     ________________________________________________________________
     ________________________________________________________________

11. PLEASE EXPLAIN BRIEFLY THE PERSONAL ACHIEVEMENTS, ACCOMPLISHMENTS,
    AND EXAMPLES OF A STRONG WORK ETHIC THAT YOU FEEL QUALIFY YOU FOR THIS
    SCHOLARSHIP.

     ________________________________________________________________
     ________________________________________________________________

12. PLEASE EXPLAIN ANY CIRCUMSTANCES CONCERNING YOUR FINANCIAL NEED
    FOR THIS SCHOLARSHIP THAT YOU WOULD LIKE THE JUDGES TO CONSIDER.

     ________________________________________________________________
     ________________________________________________________________
     ________________________________________________________________
     ________________________________________________________________

13. WHAT ARE YOUR CAREER PLANS? ________________________________

     ________________________________________________________________
     ________________________________________________________________

14. PLEASE EXPLAIN IN DETAIL ALL GRANTS, OTHER SCHOLARSHIPS, OR FINANCIAL
    ASSISTANCE YOU HAVE ALREADY BEEN AWARDED, INCLUDING THE MONETARY
    AMOUNT OF EACH, OUTSIDE OF ANY FINANCIAL SUPPORT YOUR FAMILY WILL BE
    PROVIDING.

     ________________________________________________________________
     ________________________________________________________________
15. PLEASE EXPLAIN ALL FINANCIAL AID YOU HAVE APPLIED FOR OR HOPE TO RECEIVE BUT HAVE NOT YET BEEN OFFICIALLY AWARDED. INCLUDE THE APPROXIMATE AMOUNT(S) IF KNOWN.

__________________________________________________________
__________________________________________________________

16. PLEASE EXPLAIN YOUR OWN RECENT AND PLANNED FUTURE EFFORTS TO EARN MONEY TO HELP PAY PART OF YOUR OWN HIGHER EDUCATION COSTS.

__________________________________________________________
__________________________________________________________

APPLICANT'S PERSONAL AND FAMILY BACKGROUND

1. DATE OF BIRTH _______________________

2. I AM A RESIDENT OF ________________________ (CITY) __________(STATE)

3. MARITAL STATUS ____________ (IF SINGLE, SKIP QUESTIONS 5 THROUGH 8)

4. I HAVE _______ CHILDREN: AGES ______/_____/_____/_____/____/

5. SPOUSE'S NAME _______________________

6. SPOUSE'S ADDRESS (IF OTHER THAN YOURS)

   NUMBER STREET CITY STATE ZIP

7. SPOUSE'S EMPLOYER _______________________

8. SPOUSE'S MONTHLY GROSS INCOME _______________________

9. LIST ALL EMPLOYMENT YOU HAVE HELD

   Dates Employed Nature of Work Employer

   __________________________________________
   __________________________________________
   __________________________________________

10. ARE YOU PRESENTLY EMPLOYED? _____ HOW MANY HOURS PER WEEK? _____

    WHAT IS YOUR MONTHLY GROSS INCOME? _______________________

    YEARS EMPLOYED BY THIS EMPLOYER? ______
11. FATHER OR GUARDIAN ____________________________
   ADDRESS ______________________________________
   NUMBER STREET CITY STATE ZIP

12. MOTHER OR GUARDIAN ____________________________
   ADDRESS ______________________________________
   NUMBER STREET CITY STATE ZIP

13. HOW MANY DEPENDENTS ARE THERE IN THE FAMILY BESIDES YOU? ______

14. ARE THERE SPECIAL FAMILY CIRCUMSTANCES, EXPENSES OR INDEBTEDNESS
   THAT SHOULD BE CONSIDERED? _________. IF SO, PLEASE EXPLAIN:
   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________

15. PLEASE PROVIDE ANY ADDITIONAL INFORMATION YOU WOULD LIKE THE
   SCHOLARSHIP COMMITTEE TO CONSIDER: __________________________
   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________

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

Signature of Applicant ____________________________ Date ______

STATEMENT OF PARENT OR GUARDIAN (IF APPLICANT IS UNDER 18):
I HAVE READ THE FOREGOING APPLICATION IN FULL AND HEREBY STATE THAT TO MY
KNOWLEDGE IT IS ACCURATE AND COMPLETE.

Signature of Parent/Guardian ____________________________ Date ______