Scholarship Application

This scholarship has been established by the Harwood Heights-Norridge Chamber of Commerce. The Harwood Heights-Norridge Chamber of Commerce Scholarship is a one-time, non-renewable $1,500 award that is open to any Harwood Heights or Norridge High School student who meets specific eligibility criteria. The scholarship is payable to the community college, university/college, or post-secondary (technical or trade) degreed program of the student’s choice.

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The goal of this scholarship is to support the postsecondary educational/career plans of a graduating senior who has demonstrated a commitment to personal integrity, ethics, and community service.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name: | |  | | | | | | | | | | | |
| Address: | | |  | | | | | | | | | | |
| City: |  | | | | State: | | |  | | | | Zip: |  |
| Phone: | |  | | | | | | | Email: |  | | | |
| Date of Birth: | | | |  | | | Parent/Guardian Name: | | | |  | | |
| Community college, university/college, or post-secondary (technical or trade) degreed program to attend: | | | | | |  | | | | | | | |

**Applicant Statement**

I attest that the statements made in this Application and documentation provided are true and complete to the best of my knowledge, and I hereby authorize the Harwood Heights–Norridge Chamber of Commerce to investigate any and all statements and

matters contained herein.

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Signature of Applicant Date

**Parent/Guardian Statement**

I/We attest that the statements made in this application and documentation provided are true and complete to the best of my knowledge, and I/We hereby authorize the Harwood Heights–Norridge Chamber of Commerce to investigate any and all statements and matters contained herein.

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Signature of Applicant Date

School Enrollment Verification Form

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Student Name: |  | | | Date of Birth: | | |  | | |
| Current School: | |  | | | Year in School: | | |  | |
| Name of School Official completing this form: | | |  | | | Position | | |  |

The above named student is an applicant for the Harwood Heights–Norridge Chamber of Commerce Scholarship. Applicants are required to submit this form with their completed application. Applicants for the Harwood Heights–Norridge Chamber of Commerce Scholarship must meet the following eligibility criteria:

1. Applicants must currently be students in good standing at their school
2. Applicants must be seniors, graduating the current school year.
3. Applicants must be enrolling in a community college, university/college, or post-secondary (technical or trade) degreed program for the first term following graduation.
4. Applications must be received by 10:00 a.m. on March 31st. Only applications completed in entirety will be considered.
5. Must reside in Harwood Heights or Norridge.

My signature and the seal of the school below indicate that to the best of my knowledge, the above named student meets all of the eligibility criteria. The above named student, according to present criteria, graduate from \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_High School on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

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Signature of School Official Date

Please use this space for the School Seal.

\*Return completed applications to: The Harwood Heights-Norridge Chamber of Commerce Scholarship Selection Committee at PO Box 56627 Harwood Heights, IL 60706.