

ST JOHN-DYER CHAMBER OF COMMERCE

9495 Keilman, St. John, IN 46373 (219) 365-4686 • Fax (219) 365-4602

www.stjohndyerchamber.com office@stjohndyerchamber.com

SCHOLARSHIP APPLICATION-PLEASE TYPE OR PRINT

- 1. The applicant must be a High School graduate living within the town limits of Dyer or St. John.
- 2. The scholarship must be used at an accredited college, university, or trade/vocational school.
- 3. Selection will be made on the basis of volunteerism, community commitment, character, leadership, scholastic ability, and financial need.
- 4. Please attach current high school transcripts.
- 5. Letter(s) of reference from teacher's or community organizations must be included.

DEADLINE FOR APPLICATION - APRIL 01, 2024

| APPLICANT'S NAME | |
|--|--|
| ADDRESS | |
| PHONE NUMBER YOU CAN BE REACHED | |
| E-MAIL: | |
| FATHER'S NAME | |
| | POSITION |
| MOTHER'S NAME | |
| | POSITION |
| | nool do you plan to attend? |
| | |
| What will be your field of study? | |
| Have you applied for financial aid? | |
| Have you received any other scholarships, grants, or monetary awards? ☐ YES ☐ NO | |
| Anticipated amounts? | |
| After finishing your secondary education do you | ı plan to reside in Northwest Indiana? |
| How long have you and your family been a resid | dent of Dyer or St John, Indiana? |

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Please type or print

| The St John-Dyer Chamber of Commerce is committed to the community; please tell us how you have contributed to your community. Please list specific organization/event participation, club activities, awards, or any other items of merit that are directly related to making your community a great place. Please include service hours associated with each item. Additional responses can be completed using a separate sheet or spreadsheet. |
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| The St John-Dyer Chamber of Commerce believes in socially engaged community leaders, please share an example of how you have taken a leadership role in making your school, town/community, or organization better. What was your role? Did you lead or have an established objective? What was the outcome? |
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| If you have work experience, please describe: |
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| Name of High School attended: |
| Name two teachers who know you well and include their phone numbers for reference: |
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| Why do you believe that you merit a scholarship? |
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| Print or Type A brief résumé (attach additional sheets if necessary). Include family background; information on family finances/financial need, extracurricular activities for school, church, community; special awards or recognitions; your educational goals; and other information that you feel would help the Committee make their selection. |
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All information provided will be held in confidence. By submitting this application, the applicant will grant to the St. John-Dyer Chamber of Commerce the right to use his/her photograph for the purpose of advertising for the St. John-Dyer Chamber, in all media and formats.

Deadline is APRIL 01, 2024

Please e-mail to office@stjohndyerchamber.com or return your completed application to

St. John-Dyer Chamber of Commerce, Scholarship Committee 9495 Keilman, St. John, IN 46373