



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 11, 2025*****

APPLICANT'S NAME _____

ADDRESS _____

PHONE NUMBER YOU CAN BE REACHED AT () _____ - _____

E-MAIL: _____

FATHER'S NAME _____

FATHER'S EMPLOYER _____ POSITION _____

MOTHER'S NAME _____

MOTHER'S EMPLOYER _____ POSITION _____

Which college/university/trade or vocational school 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 plan to reside in Northwest Indiana? _____

How long have you and your family been a resident 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.

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?

If you have work experience, please describe:

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?

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.

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 11, 2025

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