



**2019 Application for  
Crystal Lake Chamber of Commerce Foundation  
Leaders in Action Masters Scholarship  
clchamberfoundation.org**

Please complete, sign and submit this form **accompanied by a resume of your professional and educational experience**. Please note there are a limited number of scholarship funds available through the Crystal Lake Chamber of Commerce Foundation annually.

Notification to recipients will be sent out as soon as the Foundation decision has been made. Scholarship consideration will be based on a rating scale, which will include thoroughness of comments, information verification and explanation, presentation of materials and financial need. Foundation scholarships are only available to Crystal Lake Chamber members in good standing or their employees. Applications are to be received in the Chamber office by 4:00 pm on 03/29/2019. One full scholarship will be awarded for the Leaders in Action Master Series to Non-Profit Organizations only.

● **SECTION 1 – APPLICANT/ORGANIZATION INFORMATION**

Full Name: \_\_\_\_\_ Title: \_\_\_\_\_

Organization: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Business Fax: \_\_\_\_\_

Email Address: \_\_\_\_\_

# of years as a Chamber member: \_\_\_\_\_ or # of years employed by a Chamber member: \_\_\_\_\_

● **SECTION 2 – ESSAY QUESTIONS**

**Please answer the following questions on separate pages as completely as possible.**

1. Why are you applying for this scholarship?
2. Summarize your career objectives.
3. Describe how your participation in Leaders in Action Explore will impact your career objectives.

● **SECTION 3 – ORGANIZATION AND INDIVIDUAL COMMITMENTS**

Scholarships provide financial support toward Leaders in Action Masters tuition fees only for Crystal Lake Chamber members (non-profit) in good standing. Should you decide not to attend all sessions, all monies distributed to Leaders in Action Masters are to be reimbursed by the recipient within 30 day of the end of the program.

● **SECTION 4 – AUTHORIZATION**

Our organization supports this application.

\_\_\_\_\_  
Employer's Signature and Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

**Please note:** If the applicant receives scholarship assistance from another organization, Crystal Lake Chamber of Commerce Foundation reserves the right to withdraw all or a portion of the scholarship.

**Return one copy of your completed application and attachments to Crystal Lake Chamber of Commerce Foundation:**

Crystal Lake Chamber of Commerce  
Attention: Jackie Ruiz  
427 West Virginia Street  
Crystal Lake, Illinois 60014

Phone: 815-459-1300 ext 17  
Fax: 815-459-0243  
Email: foundation@clchamber.com

**INTERNAL USE ONLY**

Scholarship Application  Accepted  Denied

Decision Date: \_\_\_\_\_

Notification Date: \_\_\_\_\_