



IRWINDALE EDUCATIONAL FOUNDATION SCHOLARSHIP APPLICATION FORM

Application Deadline is: June 27, 2008 12:00 noon

Any application received after this deadline will not be considered.
No exceptions!

Name: _____
Please print First Middle Last

INSTRUCTIONS:

1. Please print legibly or type this application.
2. Mail this application and all required information to the Irwindale Chamber of Commerce Office, P.O. Box 2307, Irwindale, CA 91706, or hand deliver to 16102 E. Arrow Highway. Applications **MUST** be in the Chamber Office by the deadline date and time to be considered. Postmarks after the deadline date will not be accepted. For information concerning this application, call (626) 960-6606.
3. A copy of the Irwindale Educational Foundation Scholarship Policy is available upon request.
4. Extra credit will be given for volunteering at the annual fundraiser on July 18, 2008. Sign up with Theresa Olivares at City Hall or by phone at 430-2294

<i>For Office Use Only</i>	
Date Received:	_____
Application Complete:	_____
Amt. Awarded \$	_____
Check No.	_____
Approved by:	
1.	_____
2.	_____
3.	_____

You Must Check One Of The Following Qualifying Conditions:

- You are a resident of the City of Irwindale. Your Qualifying Condition is as "Resident".
 - Proof of continuous residency for previous three (3) years is required. You must submit proof for all three years. Acceptable evidence includes utility bills, income tax returns, bank statements, or school transcripts
- You are employed by or are a dependent of an employee of a company, located in the City of Irwindale, and which is a member in good standing of the Irwindale Chamber of Commerce. Your Qualifying Condition is as "Chamber Member Employee".
 - Proof of employment by "Member Company"
 - Proof of membership in good standing of the Irwindale Chamber of Commerce. (letter available by request at Chamber office).

The following items must be attached to all applications regardless of your qualifying condition above:

- Proof of qualifying condition as stated above.
- A copy of your most recent transcripts.
- Signed copy of your Income Tax Form 1040 from the previous year, or your parents' Form 1040 if you are a dependent.
- Proof of college acceptance/continuance (Example: letter from the registrar or appointment card for registration).

SECTION I. YOUR INFORMATION

Date _____

Mr.
Name Ms. _____ Phone # (____) _____

Mrs. First Middle Initial Last

Address _____
City State Zip

S. S. No. _____ - _____ - _____ Are you a U.S. Citizen _____

Alien Registration No. _____

Date of birth _____ Marital Status: Single _____ Married _____ Divorced _____

College of Acceptance _____ College Address _____

Class Status (during academic year): Freshman _____ Sophomore _____ Junior _____ Senior _____ Graduate _____

Major _____ Minor _____

Overall GPA (verified by transcripts) _____ Anticipated Graduation Date _____

Scholarship Amount Requesting \$ _____

SECTION II. EDUCATIONAL BACKGROUND

A. High School

High school attended _____ Year graduated _____

Are you currently attending high school? Yes _____ No _____

If yes, what is your overall high school grade point average? _____

B. College or Vocational

College goals or type of certificate you are seeking:

Certificate _____ AA/AS _____ BA/BS _____ Masters _____ Ph.D. _____ Other _____

Declared educational Major _____ Minor _____

Anticipated date of graduation _____ Number of college units currently completed _____

College(s) Attended: 1. _____ Units earned _____

2. _____ Units earned _____

3. _____ Units earned _____

Use additional sheets as needed to list all Colleges attended:

College degree or certificates previously received _____

Overall grade point average _____ GPA last academic year _____

Living arrangements while attending college: (Check those that apply):

with parents _____ with spouse _____

with roommate _____ alone _____

with dependent children _____ other _____

Explain on additional sheet if needed.

NOTICE:

Will you be listed as a “dependent” on your parents (or others) Federal Income Tax Return during the period for which you are applying for Scholarship? Yes No

If you **are** a “dependent” of your parents (or others), please complete Section III below, skip Section IV and complete the remainder of this Application beginning with Section V.

If you **are not** a “dependent” of your parents (or other), please Skip Section III below, and complete the remainder of this Application beginning with Section IV.

SECTION III. HOUSEHOLD & FINANCIAL INFORMATION

A. Number of Family Members in Household _____

B. Number of Family Members in College _____

C. Parent’s (or Others) Most Recent Data:

Type of tax return filed: 1040 _____ 1040A _____ 1040EZ _____

Adjusted Gross Income (AGI) Last Year: \$ _____

U.S. Tax paid: State \$ _____ Federal \$ _____

Father’s income \$ _____

Mother’s income \$ _____

Earned Income Credit (EIC) \$ _____

Annual Social Security Benefits \$ _____

Annual AFDC/ADC \$ _____

Alimony, or Child Support paid or received _____

Student’s income \$ _____ Number of hours worked per week _____

Student’s Employer _____ Phone (____) ____ - _____

D. Please estimate your monthly living expenses including housing, food, and transportation:

Estimated living expenses \$ _____ / month

E. Have you applied for any other financial aid or other scholarship? Yes _____ No _____

If no, explain why not. _____

If yes, did you receive funding and in what amount? \$ _____

Name of institution or foundation _____ Phone (____) ____ - _____

SECTION VI. STUDENT ACTIVITIES AND AWARDS RESUME
(Only list those activities and award from the previous academic year)

Please specify positions held and responsibilities as applicable.

HONORS/AWARDS: (Dean’s List, National Honor Society, Who’s Who, Recognition Awards, etc.)

CLUBS, ORGANIZATIONS AND OFFICES HELD: (Student Council, Debate, Yearbook, SADD, sorority, Kiwanis).

EXTRACURRICULAR ACTIVITIES: (Sports, Cheer, Spirit Line, Choir, Orchestra, Band, Scouts, etc.)

COMMUNITY SERVICE: (Church or other religious affiliation groups, Big Brothers or Big Sisters, Youth Groups, Volunteer Activities, **Irwindale Educational Foundation**, etc.)

EMPLOYMENT: (Please specify name of employer, job title, responsibilities, and length of employment.)

MISCELLANEOUS: (Please include any other accomplishments not covered in the other categories.)

SECTION VII. APPLICANT’S SIGNATURE

I declare the information provided in this application to be true and accurate to the best of my knowledge. I give my consent for Irwindale Educational Foundation to use my name and photo for advertising and media purposes.

Applicant’s signature _____ Date _____

The Irwindale Educational Foundation needs volunteers! Please indicate which areas you might be interested in:

- Testimonial at the annual BBQ fundraiser
- Assisting at the annual BBQ fundraiser (selling raffle tickets, spotter at live auction, set-up, etc.)
- Ticket sales/marketing for annual fundraiser

This year’s BBQ Fundraiser will be held on July 18, 2008 at Miller Brewing Company.