

APPLICATION FOR SCHOLARSHIP BASIC ECONOMIC DEVELOPMENT COURSE

Illinois Development Council
225 East Cook Street, Springfield, IL 62704
217-528-5230 217-241-4683 Fax
Email: susan@ildevelopmentcouncil.org

Deadline is June 18, 2010. Only IDC Members are eligible. Applications must be completed and submitted by email or fax to the IDC office. Applications will not be considered if they are not signed and forwarded by an IDC Sponsor, or if they are incomplete. Awarded for 2010-2011 courses only upon successful completion and verification.

PERSONAL DATA

Name: Last _____ First _____ Middle Initial: _____

Name of Employer: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Fax: _____

Email: _____

PERSONAL INFORMATION AND EDUCATION RECORD

Name of College or University: _____

Address of College or University: _____

Dates Attended: _____ Major Study: _____ Degree/Diploma _____

EMPLOYER INFORMATION SUPPORTING NEED FOR FINANCIAL AID

Length of time in Economic Development field: _____

Length of time in present position: _____

ATTACHMENTS REQUIRED

- ◆ Letter from employer: ¹endorsing request for financial aid in order for applicant to attend the educational program; ²indicating their willingness to help with percentage of remaining expenses (per diem, lodging, travel); ³indicating who will cover any remaining costs after IDC and employer.

PRIOR BUSINESS EXPERIENCE

Position: _____

Employer: _____

From/To: _____

Reason for leaving: _____

PREVIOUS SCHOLARSHIP DATA

Have you previously applied for: Scholarship Financial Aid If yes, year _____.

Attached is additional information or a resume, which I feel would be helpful to the Education Selection Committee: Yes No .

Briefly explain your interest in attending the Basic Economic Development Course:

CERTIFICATION OF APPLICANT

If I am granted a tuition scholarship, I hereby certify (check boxes if you agree):

- a. I fully understand my obligation incurred by the scholarship.
 - Provide proof of attendance after conference.
 - Notify IDC as soon as possible if unable to attend.
 - Responsible for other expenses (per diem, lodging, travel).
- b. The information submitted herein is true, accurate, and correct.
- c. I will fulfill the requirements of attendance and prescribed studies of the Economic Development Institute.

Date: _____ Signature/Name of Applicant: _____

STATEMENT OF SPONSOR

(Sponsor required to be a member in good standing of IDC)

I, _____ having read the foregoing application, in full, confirm its accuracy and hereby state I am confident of the integrity of the applicant and his/her desire to further his/her IDC effectiveness. I further state, that to the best of my knowledge, the applicant desires a continued career in the Economic Development field.

Date: _____ Signature/Name of Sponsor: _____

Name of Employer: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Fax: _____

Email: _____

For Committee Use Only

SELECTION COMMITTEE ACTION / IDC BOARD

Date: _____ Date Received: _____

Credentials Incomplete: _____

Need Not Effectively Established: _____

Recommended: _____

Credentials Incomplete: _____ Chairman, Selection Committee

Board Meeting Date: _____

Award Granted: _____

Award Denied: _____ Chairman, Selection Committee