



Michiana Chapter of SHRM SCHOLARSHIP PROGRAM

Visit SHRM website to learn more about scholarships and awards:
<http://www.shrm.org/about/awards/Pages/default.aspx>



TYPE OR PRINT ALL INFORMATION EXCEPT SIGNATURES
Completeness and neatness ensure your application will be reviewed properly.
Application postmark deadline June 30, 2020

Please check which Scholarship you are applying for:

- Sons and Daughters of Michiana Chapter of SHRM Members
- Student Chapter Members
- Alison Fox Certification Scholarship

THINGS TO REMEMBER IN APPLYING FOR A SCHOLARSHIP:

- The application must be postmarked by the deadline.
- A current complete transcript is required and must be submitted with the application. Grade reports are not acceptable. Online transcripts must display student name, school name, grade and credit hours earned for each course, and term in which each course was taken.
- YOU are responsible for forwarding all required information.

APPLICANT DATA

Last Name: _____ First Name: _____ Middle Initial: _____
 Permanent Home Mailing Address: _____
 City: _____ State: _____ ZIP Code: _____
 Telephone: _____ Email Address: _____
 Date of Birth: _____

PARENT-GUARDIAN DATA

Last Name: _____ First Name: _____ Middle Initial: _____
 Work Telephone: _____
 Michiana Chapter of SHRM Member: Yes No
 National SHRM Member ID#: _____ Email Address: _____

SCHOOL DATA

School Name _____
 City: _____ State: _____
 Telephone: _____ High School Graduation Date: _____

POST SECONDARY SCHOOL DATA

Name of postsecondary school you plan to attend. (If unknown, please list in order of preference the schools to which you have applied.) Use official school names. Do not use abbreviations.

School Name: _____
 City: _____ State: _____
 Type of School (4 yr. College or University, Trade School, etc.): _____
 Year in school next year: _____ Major or course of study: _____
 Expected college graduation date: _____

APPLICANT DATA

Last Name: _____ First Name: _____

Sending a resumé does not replace any part of this application. If space provided in any section is inadequate, you may continue on additional sheets. Attachments must follow the same format. DO NOT repeat information already reported on the application form.

WORK EXPERIENCE

Describe your work experience during the past four years (e.g., food server, babysitting, lawn mowing, office work). Indicate dates of employment for each job and approximate number of hours worked each week. List amounts earned at each job.

Employer/Position	From - Mo/Yr	To - Mo/Yr	Hours per Week
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

SCHOOL ACTIVITIES

List all school activities in which you have participated during the past four years (e.g., student government, music, sports, etc.). Note all special awards, honors and offices held. Indicate whether high school or college activities.

Activity	No. of Years Participated.	Special Awards, Honors	Offices Held
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

COMMUNITY ACTIVITIES

List all community activities in which you have participated without pay during the past four years (e.g., Boy/Girl Scouts, hospital volunteer, Special Olympics, SHRM). Note all special awards, honors and offices held.

Activity	No. of Years Participated.	Special Awards, Honors	Offices Held
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

GOALS AND ASPIRATIONS

Make a brief statement or summary of your plans as they relate to your educational and career objectives and long-term goals.

APPLICANT DATA

Last Name: _____ First Name: _____

UNUSUAL CIRCUMSTANCES

Please describe how and when any unusual family or personal circumstances have affected your achievement in school, work experience, or your participation in school and community activities.

The student is responsible for submitting all materials to Michiana Chapter of SHRM Scholarship Committee on time. Incomplete applications will not be evaluated. This application becomes complete and valid only when all of the following materials have been received::

- Student has completed Attachment A (the application)
- Adult Advisor has completed the Attachment B reference and returned in a sealed envelop.
 - Current Complete Transcript(s) of Grades (including grading scale)

Applications must be postmarked by the deadline

Applications will not be returned. (It is recommended you keep a copy for your files.)

I acknowledge decisions are final. I certify I meet eligibility requirements of the program as described in the guidelines and the information provided is complete and accurate to the best of my knowledge. If requested, I will provide proof of information, including an official transcript of grades. Falsification of information may result in termination of any award granted.

Applicant's Signature : _____

Date : _____

Parent's Signature : _____

Date : _____

All materials, including transcript, must be addressed to:

Michiana Chapter of the Society for Human Resource Management
Attn: Scholarship Committee
P.O. Box 1921
South Bend, IN 46634-1921

ATTACHMENT A – Recommendation

(This must be completed by an adult appraiser and returned in a sealed envelope with the application)

APPLICANT APPRAISAL/REFERENCE (REQUIRED)

To the Applicant: This section is required and must be completed in the format provided. If incomplete, your application will not be evaluated. Please print this page and have it completed by a high school or college counselor or advisor, an instructor, or a work supervisor who knows you well.

To the Adult Appraiser: *You have been asked to provide information in support of this application. Please give immediate and serious attention to the following statements. When complete, please return to applicant. If you prefer, photocopy this section and return to applicant in a sealed envelope. A letter of recommendation does not replace this section.*

The applicant's choice of a postsecondary educational program is:

- extremely appropriate
- very appropriate
- moderately appropriate
- inappropriate

The applicant's achievements reflect his/her ability:

- extremely well
- very well
- moderately well
- not well

The applicant's ability to set realistic and attainable goals is:

- excellent
- good
- fair
- poor

The quality of the applicant's commitment to school and/or community is:

- excellent
- good
- fair
- poor

The applicant is able to seek, find, and use learning resources:

- extremely well
- very well
- moderately well
- not well

The applicant demonstrates curiosity and initiative:

- extremely well
- very well
- moderately well
- not well

The applicant demonstrates good problem-solving skills, follows through, and completes tasks:

- extremely well
- very well
- moderately well
- not well

The applicant's respect for self and others is:

- excellent
- good
- fair
- poor

Comments: _____

Appraiser's Name: _____ Title: _____

Telephone: _____ Organization: _____

Signature: _____ Date: _____

ATTACHMENT B - Transcript

(This must be completed and returned with the application)

APPLICANT DATA

Last Name: _____ First Name: _____

A complete transcript of grades must be sent with this application. Grade reports are not acceptable.

1. Students currently or previously enrolled in college or vocational-technical school must include all college or vo-tech transcripts of grades from each school attended. Online transcripts must display student name, school name, grade and credit hours earned for each course, and term in which each course was taken (Completion of high school information below is not necessary.)

2. High school seniors and students who have completed less than one full quarter or semester of postsecondary education must include a high school transcript of grades and have this section completed by the appropriate school official. (A clear explanation of the high school's grading scale must also be submitted.)

SAT _____
Critical Reading _____
Math _____
Writing _____

ACT _____
English _____
Math _____
Reading _____
Science _____
Composite _____

Applicant ranks _____ in a class of _____

Cumulative Grade Point Average

Weighted: _____/4.0 scale

Unweighted: _____/4.0 scale

School Official's Signature: _____

Date: _____

Title: _____ Telephone: _____

School Official's Address: _____

City: _____ State: _____ ZIP Code: _____