



The Greater Elizabeth Chamber of Commerce Foundation Scholarship



Deadline: April 24, 2026

Please Type All Responses

SCHOLARSHIP APPLICATION REQUIREMENTS:

- ⇒ Will be a graduate of Elizabeth High School (NJ) in June 2026
- ⇒ High School GPA of 2.5 or better
- ⇒ Admitted to a 4/2-year College/University or Accredited Trade School
- ⇒ Active in volunteering/community service
 - ⇒ Minimum of 60 hours of Community Service during High School

Scholarship Information:

The scholarship recipient will receive a nonrenewable scholarship of \$1,500.00 credited for the recipients first year attending a 4/2-year College/University or Accredited Trade School.

APPLICANT INFORMATION

Name: _____

Street Address, City, State, Zip Code: _____

Email & Cell # : _____

Date of birth: _____ Place of birth: _____

Date of Entry into USA: _____

School Attending: _____

School Counselor Name and Phone Number: _____

FAMILY INFORMATION

Please provide the following information. Complete all questions

	Father / Guardian	Mother / Guardian
Name		
Home address		
Telephone		
Current Employment		

Is either parent deceased?

Yes

NO

If YES, which one? _____

How many siblings do you have?

Are any siblings currently enrolled in a college/university?

YES

NO

If YES, list names and college/universities:

How many dependents live in your home?

HIGHER EDUCATION PLANS

Please list which any Colleges/Universities/Trade Schools you have applied to (Can add an additional sheet of paper):

1. _____

2. _____

3. _____

4. _____

5. _____

Please list which any Colleges/Universities/Trade Schools you have been accepted to (Can add an additional sheet of paper):

1. _____

2. _____

3. _____

4. _____

5. _____

Which Colleges/Universities/Trade School will you attend?

1. _____

Will you be: Dorming or Commuting?

FINANCIAL

All applicants will be required to submit either their FAFSA report or financial aid award letter with their applications.

List all sources of financial aid, scholarships, grants (not loans).

**PARTICIPATION IN VOLUNTEERISM AND
EXTRACURRICULAR CLUBS/ACTIVITIES
(Attached Extra Sheets If Necessary)**

Volunteer Activities:

1. Name of Activity: _____
Supervisor's Name: _____
Number of hours while in High School: _____
2. Name of Activity: _____
Supervisor's Name: _____
Number of hours while in High School: _____
3. Name of Activity: _____
Supervisor's Name: _____
Number of hours while in High School: _____

Extracurricular Clubs/Activities:

1. Name of Club: _____
Advisor's Name: _____
Number of years while in High School: _____
Officer Position: Yes No _____
2. Name of Club: _____
Advisor's Name: _____
Number of years while in High School: _____
Officer Position: Yes No _____
3. Name of Club: _____
Advisor's Name: _____
Number of years while in High School: _____
Officer Position: Yes No _____

EMPLOYMENT AND REFERENCE (TBD)

Employment:

Are you employed? Yes No

Name of employer: _____

Name of Supervisor and Phone Number: _____

Position: _____

Date of hire: _____

Number of hours worked per week: _____

References:

Please provide a short letter of recommendation from someone who knows you well, other than a relative. Examples of reference providers include teachers, employers, coaches, supervisors of volunteer activities, and youth group/scout/club leaders. Please indicate on this form their name, telephone number, and connection to you. Attach the completed reference letter.

Name of reference: _____

Phone number of reference: _____

Relationship: _____

MISCELLANEOUS

(IF APPLICABLE)

Please give any further information that you feel has a bearing on this application.

Essay

Please choose ONE of the following topics and write a 250-500 word essay:

- Describe your greatest strengths and weaknesses.
- How has volunteering in your community impacted your life?
- Where do you see yourself in 5 years?

Please attach essay to application packet.

AGREEMENTS, AUTHORIZATIONS, SIGNATURES

In applying for this scholarship, I understand that any award made will be granted only as a credit against the expenses, including tuition fees, books, supplies, and the equipment to be used in furthering my education, in compliance with the Internal Revenue Code and Rulings.

In the event that other scholarship monies are awarded to the student which equal or exceed all institutional expenses and tuition, the Scholarship Committee reserves the right to designate the scholarship funds to other areas for the student's education in accordance with the Internal Revenue Code and Rulings.

It is my responsibility to provide the Scholarship Fund the name of the college I will attend and the address and telephone contact information for the college bursar's office so that payment may be made.

I hereby grant permission to the fund to receive and evaluate all my academic and other records provided to them directly or from school authorities. I further agree to make financial information available to the fund if requested.

BY SIGNING, I CONFIRM THAT ALL NECESSARY INFORMATION IS INCLUDED, ALL REQUIREMENTS HAVE BEEN MET AND ALL NECESSARY SIGNATURES ARE HERE.

Signature of applicant: _____

THIS APPLICATION REQUIRES THE SIGNATURE OF FATHER, MOTHER OR GUARDIAN AFFIRMING KNOWLEDGE OF THIS APPLICATION.

Signature of parent / guardian: _____

Scholarship aid is offered annually to students who are graduates of Elizabeth High Schools and at the time of this application, are residents of Elizabeth, NJ. This application is for the exclusive use of the Scholarship Committee. All information will be held in strict confidence. Contact your Guidance Office if you have any questions while completing this application.

It should be understood that after all applications are reviewed, scholarships will be awarded at the sole discretion of the Greater Elizabeth Chamber of Commerce Foundation and the Elizabeth Public Schools.

STUDENT APPLICATION CHECKLIST

Initial the checklist to confirm that the following items are included in the application package.

** (Attach all required materials to completed application using the following list as a guideline.)

___ *Completed (Typed) and signed application*

___ *One Letter of Recommendation*

___ *Essay Question*

___ *Official Transcript*

___ *Copy of SAT/ACT Scores*

___ *Letter of Acceptance to a 2/4- year college/university or accredited trade school.*

___ *FAFSA Report or Financial Aid Award Letter from intended school of enrollment*

To be completed by School Official

STUDENT'S CURRENT CLASS RANK (entered by Counselor / Counselor MUST initial)

STUDENT'S CURRENT GPA (entered by Counselor / Counselor MUST initial)

ATTN.: SCHOOL COUNSELOR

Please review checklist to confirm that the all items are included in the application package and you have reviewed the application.