



ECONOMIC CLUB OF GRAND RAPIDS BUSINESS STUDY ABROAD SCHOLARSHIP APPLICATION*



The Economic Club of Grand Rapids established a fund in 2000 to provide financial assistance to students pursuing study abroad in business. The Economic Club is an association of individuals interested in and contributing to the growing economic health of the Grand Rapids metropolitan area. One (or more) scholarships of up to \$2000 will be awarded annually. The applicant must meet the following criteria:

- Applicant must have sophomore or above standing at the time of application in an undergraduate business program or in a graduate-level business program at any public or private college or university of their choice. Applicant must have a declared major in accounting, business administration, economics, managerial science (all areas), mathematics, computer science, engineering, marketing, or fields of study related to business or economics.
- Applicant must have at least a 3.0 cumulative grade point average.
- Applicant must be a resident of Kent, Allegan, Ottawa, or Muskegon counties for the prior three years **or** must be a resident student at a college or university in the West Michigan area for the prior two years or more consecutively.
- Foreign study programs must be endorsed and accepted as a part of or as a credit course in the applicant's degree granting college or university. Funds must be administered through the home college/university financial aid office.
- The recipient may be asked to deliver a brief oral presentation to the Economic Club of Grand Rapids within six months of return to the United States.

Directions: Complete all sections on this form and follow submission instructions.

Decisions will be announced in mid-May. Payments are processed in June.

APPLICANT INFORMATION

Name (Last/First/Middle) _____

Address _____

City _____ State _____ Zip _____

County _____ Number of years at this address _____ Date of Birth: _____

Phone: Home _____ Business _____

E-Mail _____

During the school year, it is best to reach me at the following phone number _____

Name of College/University _____

Major course of study _____

Upcoming year in college _____ Anticipated date of graduation _____

Do either of your parents have a 4-year college degree: Yes _____ No _____

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INTERNATIONAL STUDY INFORMATION

Study Abroad Program Name _____

Study Abroad Program Location (Country) _____

Are you required to know a foreign language to participate in this program?

If so, what language? _____

Semester/dates you plan to study abroad _____

List courses you have taken relevant to your study abroad and your declared major

Course	Credit Hours	Grade

ADDITIONAL INFORMATION

List organizations/business club memberships

List awards/honors received since entering college

STATEMENT OF GOALS - Attach a statement (not to exceed two double-spaced, typewritten pages) indicating why you desire to study abroad or participate in an international program.

LETTERS OF REFERENCE - Attach two letters of reference. The letters should include information on the applicant's abilities, potential, character and participation in the community.

1. Letter from teacher, counselor or administrator of college/university
2. Letter from elected public official in Kent, Ottawa or Muskegon Counties.

LETTER OF ACCEPTANCE AND TRANSCRIPT – Attach a copy of acceptance letter from the college/university office of international study and your most recent available transcript (unofficial transcript will suffice).

FINANCIAL NEED – Applications without the Financial Need Section will not be considered complete.

Dependency Status:

Dependent Student: Provide Parent and Student income information. Application will be rejected if parent information is missing.

Independent Student: Provide Student Information Only: *To be considered an Independent Student, you must be able to answer yes to ONE of the following questions:*

Were you born before January 1, 1999?	Yes	No
Are you married?	Yes	No
Are you working on a degree <i>BEYOND</i> a bachelor's degree for the upcoming academic year?	Yes	No
Are you, or were you, an orphan or ward of the court or in foster care at any time since the age of 13?	Yes	No
Are you a veteran of the US Armed Forces?	Yes	No
Are you currently serving on active duty in the US Armed Forces for purposes other than training?	Yes	No
Do you have children who receive <i>MORE THAN</i> half of their support from you?	Yes	No
Are you an emancipated minor as determined by the court in the state of your legal residence?	Yes	No
Do you have dependents (other than children or spouse) who live with you and you provide more than half of their support?	Yes	No
Are you homeless or at risk of being homeless?	Yes	No

Applicant is considered (check only one)

Dependent: Parent(s) and Student's Combined Adjusted Gross Annual Income from **2022:** \$ _____
 Number in parent's household, including applicant: _____

Independent: Student's Adjusted Gross Annual Income: \$ _____ & total dependents other than spouse _____

Need:

Anticipated Expenses Total Cost of Attendance for upcoming year (Include travel fees and room and board) \$ _____

Anticipated Resources

A) Family Contribution (EFC or Student Aid Index from your FAFSA Student Aid Report) \$ _____
 (if you are unable to file a FAFSA, self-report your contribution)

B) All Scholarships and Grants offered to date \$ _____
 (returning college students: provide last year's awards if new award package is not available)

C) Any Other Resources (do not include any loans offered) \$ _____ \$ _____

Total Resources (Total of A, B and C)

Assessed Need (Expenses Less Resources) \$ _____

SIGNATURE

In submitting this application, I certify that the information is complete and accurate to the best of my knowledge. I understand that falsification of information will result in termination of any scholarship granted. If selected to receive a scholarship, I agree to the use of my name, likeness and information contained in my application (excluding financial information) for promotional purposes for the Grand Rapids Community Foundation without further compensation or notification.

Applicant's Signature _____ Date _____
 You may sign electronically by typing your name.

Submit application and supporting documents via email to scholarships@grfoundation.org by **March 1.**

Questions: Contact Ruth Bishop at 616-284-4903 or rbishop@grfoundation.org

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