



# W. Bill Williams Application \$5,000 scholarship

Eligible for renewal

Must be a High School Senior to apply

Please type or write clearly in ink.

## Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Last First M.I.

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Home address \_\_\_\_\_  
(\*\*Must reside on south or west side of Chicago\*\*)

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Race/Ethnicity \_\_\_\_\_ Other \_\_\_\_\_ (please specify)  
(Black, Latino/Hispanic, Asian American, Asian Pacific, Native American, Caucasian, other)

## Education

High School: \_\_\_\_\_

GPA: \_\_\_\_\_ Grade Level: \_\_\_\_\_

Anticipated Graduation date/year \_\_\_\_\_

Academic plans upon High School graduation: \_\_\_\_\_  
Community College, culinary training, or college/university. If not yet enrolled, where do you plan to attend?)

**A copy of proof of college enrollment is required before any funds are remitted.**

## Essay – 750 word maximum

### About Bill Williams:

Bill was a trailblazer, entrepreneur and innovator. He had a significant impact on the hospitality and tourism industry.

1. Tell us about a time you demonstrated leadership to overcome an obstacle.
2. How do you display vision or passion for yourself and anyone in your community (school, church, family etc.)?

## Attach Resume

- Include employment history, if applicable
- Include internships (paid/unpaid) and volunteer experience, sports, clubs and activities

## Supporting Materials

This application includes submission of the following materials:

- Acceptance letter to college and proof of registration
- Resume
- Transcripts to provide proof of H.S. graduation
- (3) letters of professional recommendations - **(One letter must come from a Teacher or Educator)**
- Essay

A completed application and supporting materials should be submitted to [scholarships@choosechicago.com](mailto:scholarships@choosechicago.com).

## Disclaimer and Signature

*I certify that my answers are true and complete to the best of my knowledge.*

*If this application leads to the receipt of the Choose Chicago Foundation, W. Bill Williams scholarship. I understand that false or misleading information in my application, interview, or Choose Chicago Student Partner records may result in forfeiting/returning the award.*

*I understand if I am accepted to receive this scholarship, I will complete the requirements outlined.*

*All funds will be distributed directly to school applicant is currently enrolled.*

*I also must complete skill development milestones, maintain academic good standing, integrity, good work ethic and performance, and consistently meet (or exceed) expectations as required with my mentor, the Choose Chicago Foundation and during any employment opportunities (internship, fellowship, and immersion programs).*

*If awarded, I agree to send the Choose Chicago Foundation a photo of myself. I also give the Choose Chicago Foundation permission to contact me in the future, use information provided in this application, my photo, and any testimonial statements in Choose Chicago's promotional and digital copy.*

*I am eligible to receive this scholarship up to four years, pending fulfillment of all scholarship requirements. If at any point, I do not meet the requirements, I understand, I forfeit eligibility for renewal of scholarship.*

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

(If applicant is under age 18, Guardian signature required)

**The Choose Chicago Foundation reserves the absolute right to cancel or reject a scholarship application that it, in its sole judgment, deems inappropriate.**