

Choose Chicago Foundation Jim Reilly \$5,000 Scholarship Application

DEADLINE TO APPLY FEBRUARY 3, 2025

Must be a college student to apply. Eligible for renewal based on academic level.

Please	type	or	write	clearly	in	ink.

Applicant Information						
Full Name:			Date:			
Last		First	M.I.			
Phone: E		Email	mail			
Home address						
(**Must reside on	south, west side of Ch	nicago or south suburbs o	f Chicagoland area**)			
City	State	Zip	_			
Race/Ethnicity						
	Jame, Asian American,	Education				
College or Univers	ity:					
School Mailing Add	dress:					
GPA:						
Academic Year – F	reshman, Sophomore,	Junior, Senior, other:				
Anticipated Gradu	ation date/year					
Submit an official	copy of transcripts to	scholarship@choosechica	igo.com.			

Essay – 500 word maximum

About Jim Reilly:

Jim was a visionary and had great passion to support Chicago becoming a world-class competitor in the everchanging convention and tourism industries. He was also a fiercely dedicated public servant.

- 1. How do you currently see these key characteristics of **vision and passion** in yourself and why do you feel you should be awarded this scholarship?
- 2. What impact do you currently have in your sphere of influence (i.e. community, school, church, family). Why is this important to you?

Attach Resume

- Include employment history, if applicable
- Include internships (paid/unpaid) and Volunteer Experience

Supporting Materials

This application includes submission of the following materials:

- Acceptance letter to college and proof of registration
- Resume
- Transcripts to provide proof of enrollment
- (2) letters of professional recommendations (One letter must come from a staff or faculty member)
- Essay

A completed application and supporting materials should be submitted to 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, Jim Reilly 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.