

SCHOLARSHIP



GCCE SCHOLARSHIP PACKET

ROGER B. WESTRUP SCHOLARSHIPS

APPLICATION FOR CONTINUING EDUCATION PROGRAMS

GCCE SCHOLARSHIP GUIDELINES

Gulf Coast Chamber Executives provide scholarships base on the organization income of the current year. Scholarship recipients are required to provide a copy of the receipt for registration in the training program for which they applied. The receipt should be sent to the GCCE Treasurer within 90 days of notification. All checks are payable to the Chamber of Commerce that employs the recipient.

Scholarships will only be awarded to GCCE Members in good standing. All memberships should be paid in full with the person attending the training as a paid member if not the Chamber Main Representatives.

More than one scholarship will NOT be awarded to any Chamber regardless of the type of scholarship requested. Chambers are encouraged to submit all applications; the selection committee will award on scholarship per Chamber.

The Scholarship Committee will take the following things into consideration when selecting who will receive scholarships.

- Length of time in Chamber Profession
- Commitment to Chamber Profession
- Ability to Pay (size of Chamber budget & training budget)
- Attendance at other training programs
- Commitment to GCCE
- Previous past scholarships awarded to the Chamber
 - This does not mean that if an employee of a Chamber has received scholarships in the past that they will not be considered in the future.



GCCE ROGER B WESTRUP SCHOLARSHIP APPLICATION FOR CONTINUING EDUCATIONAL PROGRAMS

GENERAL INFORMATION:

Name of Applicant: Date:

Title: Chamber:

Business Address: Email:

Business Phone: Business Fax:

Chamber Experience (include years, chambers, titles)

Chamber:	Years:	Titles:
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

CONTINUING EDUCATIONAL EXPERIENCE (check all that apply)

Institute for Organization Management Number of years

Center for Chamber of Commerce Excellence (TCCE)

Other (list)

<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

This scholarship will be utilized for:

TCCE Conference Center for Chamber of Commerce Excellence
 Institute Location: Dates:

Last Level Completed (Institute) Year Completed:

Have you ever served as an Institute State Promotion Chair and/or Calls correspondent? Yes No

If yes, what years:

Have you ever served as an Institute Class Advisor? Yes No

Have you applied for other scholarships for the program you are applying for? Yes No

If yes, please list to whom (sponsoring scholarship) & how much awarded/or zero if not.

Scholarship From:	Amount
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

If you are NOT awarded a scholarship, will you still attend Institute or Center for Chamber Excellence this year?

Yes No If not, why?

ORGANIZATIONAL INFORMATION:

Population of area served: Number of Chamber Members:

Number of employees Continuing Education Budget:

Number of employees attending continuing education programs:

Dues income for the latest fiscal year:

Total Income for that year: Gross Net

Does your employer/board know you are applying for a scholarship? Yes No

What organizations does your Chamber hold membership?

Gulf Coast Chamber Executives (GCCE) Texas Chamber of Commerce Executives (TCCE)

US Chamber of Commerce

American Chamber of Commerce Executives (ACCE)

Other Regional Organizations:

Other Professional Organizations:

The scholarship committee judges applicants on such qualifications as dedication to the profession, commitment to continuing education programs, financial need, etc. Please answer the following questions. Please number your answers (1, 2, & 3) typed on a separate sheet and attach to the application.

1. Why do you feel you are qualified to receive a scholarship?
2. Summarize your career objectives and describe your understanding of organizational management.
3. Why do you want to attend Institute, The Center for Chamber of Commerce Excellence, TCCE Annual Conference and what do you hope to gain from attending?
4. Do you plan to make Organization Management a vocation? Yes No

Please list three (3) references, at least one of which is a professional organization executive.

Name: Title

Business: Phone
/email

Name: Title

Business: Phone
/email

Name: Title

Business: Phone
/email

CERTIFICATION:

I hereby certify the information herein submitted is true and accurate. I will fulfill the requirements of attendance and prescribed studies of the continuing education program I have chosen to attend.

Applicants Signature: Date:

Employer's Signature: Date:

Applications due by: Please mail to:

Baytown Chamber of Commerce, email to: tracey@baytownchamber.com