## Gulf Coast Chamber Executives "Roger B. Westrup" Scholarship Application For Continuing Educational Programs May 18, 2017 – Deadline

Mail to: Baytown Chamber of Commerce, 1300 Rollingbrook, Ste 400, Baytown, TX 77521 Fax (281) 428-1758 E-mail <u>tracey@baytownchamber.com</u>

| General  | Information:                          |                  |              |       |                  |        |  |  |
|--|---------------------------------------|------------------|--------------|-------|------------------|--------|--|--|
| Name:  |                                       |                  |              |       | Date:            |        |  |  |
| Title:   |                                       |                  |              |       | Chamber:         |        |  |  |
| Business<br>Address  |                                       |                  |              |       | Email:           |        |  |  |
| Business Phone:  |                                       |                  |              |       | Business Fax:    |        |  |  |
| Chamber Experience (include years, chambers, titles):                              |                                       |                  |              |       |                  |        |  |  |
|  |                                       |                  |              |       |                  |        |  |  |
|  |                                       |                  |              |       |                  |        |  |  |
|  |                                       |                  |              |       |                  |        |  |  |
| Continu  | ing Educational Ex                    | xperience:       |              |       |                  |        |  |  |
| Institute for Organization Management  |                                       |                  |              |       | Number of years: |        |  |  |
| Center for Chamber of Commerce Excellence (TCCE)                                   |                                       |                  |              |       |                  |        |  |  |
|  | Other (list)                          |                  |              |       |                  |        |  |  |
| This scholarship will be utilized for:  TCCE Conference                            |                                       |                  |              |       |                  |        |  |  |
|  | Institute:                            | <b>Location:</b> |              |       |                  | Dates: |  |  |
|  | Last Level Completed: Year Completed: |                  |              |       |                  | eted:  |  |  |
| Center for Chamber of Commerce Excellence: Location:                               |                                       |                  |              |       |                  |        |  |  |
| Have you ever served as an Institute state promotion chair or class correspondent? |                                       |                  |              |       |                  |        |  |  |
|  | Yes:                                  | No: If           | yes, what ye | ears? |                  |        |  |  |
|  |                                       |                  |              |       |                  |        |  |  |

| Have you ever served as an Institute class advisor?   |              |               |             | class                |           | Yes             |             |        |                    |       | No      |
|---|--------------|---------------|-------------|----------------------|-----------|-----------------|-------------|--------|--------------------|-------|---------|
| auvi501.  |              |               |             |                      |           |                 |             |        |                    |       |         |
|   |              |               |             |                      |           |                 |             |        |                    |       |         |
|   |              |               |             |                      |           |                 |             |        |                    |       |         |
| II  |              | J Can amer a4 | hau aahala  |                      | 4h a a    |                 |             |        | . f <sub>a</sub> 0 |       |         |
| Have yo   | и аррпес     | d for any ot  | ner scholz  | arsnip ior           | tne pro   | gram y          | you are ap  | pryrng | ; ior :            |       |         |
|   | Yes:         |               | No:         | List Sp              | onsor:    |                 |             |        |                    |       |         |
|   |              |               |             |                      |           |                 |             |        |                    |       |         |
| If you a  | re not aw    | arded a scl   | olarship.   | will vou s           | till atte | nd Inst         | titute or C | Center | for Cha            | mber  | of      |
| Comme   | rce          |               |             |                      |           |                 |             |        |                    |       |         |
| Exceller  | ce this y    | ear?          |             | Yes:                 |           |                 | No:         |        |                    |       |         |
| If this is  | for the (    | Center for (  | Chamber (   | of Comme             | rce Exc   | ellence         | e, will you | be ad  | vancing            | to In | stitute |
| in the  |              |               |             |                      |           |                 |             |        |                    |       |         |
| future?   |              | Yes:          |             | N                    |           | f not, v<br>ot? | why         |        |                    |       |         |
|   |              |               |             | 1                    |           |                 |             |        |                    |       |         |
| Organiz   | ation Int    | formation:    |             |                      |           |                 |             |        |                    |       |         |
| Populat   | ion of ar    | ea            |             | N                    | lumber    | of cha          | mber        |        |                    |       |         |
| served: members:  |              |               |             |                      |           |                 |             |        |                    |       |         |
|   |              |               |             | Continuing Education |           |                 |             |        |                    |       |         |
|   |              |               |             | B                    | Budget:   |                 |             |        |                    |       |         |
| Name le ca  |              |               | din a soudi |                      | 4:        |                 |             |        |                    |       |         |
| Number of employees attending continuing education programs:  |              |               |             |                      |           |                 |             |        |                    |       |         |
| Dues income for the latest fiscal   |              |               |             |                      |           |                 |             |        |                    |       |         |
| Dues inc  | come for     | ine latest fi | scai        |                      |           |                 |             |        |                    |       |         |
| V   |              |               |             |                      |           |                 | 1           |        |                    |       |         |
| Total income for that year: Gross: Net:   |              |               |             |                      |           |                 |             |        |                    |       |         |
| Does your employer/board know you are applying for a  |              |               |             |                      |           |                 |             |        |                    |       |         |
| scholarship?  |              |               |             |                      |           |                 |             |        |                    |       |         |
| 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, and 3, typed on a separate sheet and attached to the application. |              |               |             |                      |           |                 |             |        |                    |       |         |
| тррисац   | V11 <b>.</b> |               |             |                      |           |                 |             |        |                    |       |         |
| 1. Why  | do you fe    | el you are o  | qualified t | o receive a          | a schola  | rship?          |             |        |                    |       |         |
|   |              |               |             |                      |           |                 |             |        |                    |       |         |

| 2. Summarize your career objectives and describe your understanding of organizational management?                                     |            |                    |                 |     |  |  |  |
|---|------------|--------------------|-----------------|-----|--|--|--|
| 3. Why do you want to attend Institute or the Center for Chamber of Commerce Excellence, and what do you hope to gain from attending? |            |                    |                 |     |  |  |  |
| youn  | iope to ga | am nom attending.  |                 |     |  |  |  |
| 4. Do you plan to make Organization Management a vocation?  Yes  No   |            |                    |                 |     |  |  |  |
| 5. What organizations is your Chamber a member of?  |            |                    |                 |     |  |  |  |
| Gulf Coast Chamber Executives   |            |                    |                 |     |  |  |  |
| Texas Chamber of Commerce Executives  |            |                    |                 |     |  |  |  |
|   | U.S. Ch    | namber of Commerce |                 |     |  |  |  |
| American Chamber of Commerce Executives   |            |                    |                 |     |  |  |  |
| Other regional organizations  |            |                    | Please list:    |     |  |  |  |
| Other professional organizations  |            |                    | Please<br>list: | se  |  |  |  |
| Please list three references, at least one of which is a professional organization manager.   |            |                    |                 |     |  |  |  |
| NT.   |            |                    |                 |     |  |  |  |
| Name:   |            |                    | Tit             | e:  |  |  |  |
| Business:   |            | Pho<br>#           | Phone #         |     |  |  |  |
| Name: Title:  |            |                    |                 |     |  |  |  |
| Name:   |            |                    | 110             | e:  |  |  |  |
| Business:   |            | Pho<br>#           | one             |     |  |  |  |
|   |            |                    | ,               |     |  |  |  |
| Name:   |            |                    | Titl            | le: |  |  |  |
| Business:   |            | Pho<br>#           | one             |     |  |  |  |
|   |            |                    |                 |     |  |  |  |
|   |            |                    |                 |     |  |  |  |
| 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 educational program I have chosen to attend.

| Applicant's           | Date: |
|-----------------------|-------|
| signature:            |       |
|                       |       |
| Employer's            | Date: |
| Employer's signature: |       |

## GCCE SCHOLARSHIP GUIDELINES

Gulf Coast Chamber Executives provide scholarships based 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 made payable to the Chamber of Commerce that employs the recipient.

Scholarships will only be awarded to GCCE members with membership paid in full.

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 one 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 and 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).