

Redford Chamber Scholarship Fund

26050 Five Mile
Redford MI 48239

Dear Student,

Attached you will find the application for the 2025 Scholarships from the Redford Chamber Scholarship Fund. All applicants must meet the following requirements to be eligible for a scholarship. False statements will be grounds for withdrawal of a scholarship offer.

- All applicants must be high school seniors graduating from the current school year.
- The applicants must be residents of Redford Township for the past two years. (Proof of residency will be required upon award of scholarship.)
- Applicants must be attending college, trade or academy school in the fall semester immediately following their graduation.
- Applicant must present to the Redford Township Scholarship Fund the first semester paid receipt.
- Student's transcript must be included with application.
- The last four digits of the student's social security number must be placed on all pages of the application form.
- Officers of the Scholarship Fund Board and their immediate family are ineligible to apply for scholarships.
- By submitting this application, applicant certifies that their information is true and essays are their own work and that they have read these rules and guidelines.
- Items taken into consideration but not limited to: grade point average, extracurricular activities, employment, community service, written essay, and other scholarships received.

No Application Will Be Accepted After The March 31, 2025 Deadline

Applicants selected as winners will be notified by end of May, 2025

Mail or deliver the completed application to: Redford
Chamber of Commerce
26050 Five Mile
Redford MI 48239

Questions should be directed to Allie at 313-535-0960

Thank you to our 2024/25 Sponsors

- Redford Union School District
- Bill McSween
- Java Payment Services
- Redford Cement Co.
- DTE
- Pat McRae
- Public Service Credit Union
- Cardinal Barbers
- Morena's Event Venue
- Schoolcraft College
- Mayflower Lanes
- Small Business Association of Michigan
- LMR Advisors
- Garwood, Buda, Knight & Associates

Redford Township Chamber Scholarship Fund APPLICATION - 2025

Date: _____

Student's Name _____

Student's Address _____

Student's Cell Number _____

Parent/Guardian's Cell Number _____

Student's Email _____

High School _____

Counselor's Name _____

Last Four Digits of Student's Social Security Number _____

Grade Point Average _____

College You Plan to Attend in the Fall of 2025

First Choice: _____

Second Choice: _____

Scholarship Amount Currently Awarded \$ _____

Future Plans and Goals _____

Student Signature _____

Parent/Guardian Signature _____

The Redford Township Chamber Scholarship Fund does not discriminate on the basis of race, ethnicity, national origin, color, religion, gender, age, disability, marital status, sex, gender, sexual orientation, gender identification or political affiliation.

Office Use Only:
 Student # _____
 GPA _____

School Activities - Clubs

Include all school club activities you participated in. If more space is needed, please copy before filling out this form. Please do not include normal classes.

Activity	Grade(s) Participated				Leadership Position Held in Which Grades				Number of Months Met During School Year?			
	9th	10th	11th	12th	9th	10th	11th	12th	≤1	1-3	4-6	7-9
1.												
2.												
3.												
4.												
5.												
6.												
7.												

School Activities - Athletics

Include all school sports activities you participated in. If more space is needed, please copy before filling out this form.

Activity	Grade(s) Participated				Leadership Position Held in Which Grades				Number of Months Met During School Year?			
	9th	10th	11th	12th	9th	10th	11th	12th	≤1	1-3	4-6	7-9
1.												
2.												
3.												
4.												
5.												
6.												
7.												

Last 4 digits of your social security # _____

Office Use Only:
 Student # _____
 GPA _____

Employment History

Include average number of hours worked per week. Please indicate if it is permanent or seasonal employment.

Employer / Position	Grade(s) Employed				Average # of Hours Worked Weekly				Number of Months Employed			
	9th	10th	11th	12th	≤5	5-10	11-15	16-20	≤1	1-3	4-6	7-9

Community Service - Volunteerism History

Include average number of hours volunteered per month.

Service / Recipient	Grade(s) Volunteered				Average # of Hours Volunteered Monthly				Number of Months Volunteered			
	9th	10th	11th	12th	≤5	5-10	11-15	16-20	≤1	1-3	4-6	7-9

Last 4 digits of your social security # _____

