

NORTHERN ILLINOIS UNIVERSITY
The Chief Richard Gunther Firefighters' Endowed Scholarship

Deadline: February 1, 2009 - for Spring 2009

Candidates must:

- Be full time, undergraduate degree seeking juniors or seniors at NIU
- Be in good academic standing with a minimum 3.0 cumulative NIU GPA
- Demonstrate Financial Need
- Provide a one-page typed statement describing why the candidate deserves the award as well as the role his/her parent(s) career as a firefighter or EMT has played in their life.

Special consideration will be given to students whose parent(s) are currently employed, retired from, disabled from the job (or died) while employed as a firefighter or emergency medical technician (EMT). Special consideration will also be given, in the following order, to students whose parent(s):

- are/were employed in the city of Chicago, IL as a firefighter or EMT
- are/were employed in the state of Illinois as a firefighter or EMT
- are/were employed as a firefighter or EMT in the United States

NAME _____
(Last) (First) (z-ID)

ADDRESS _____
(Street) (City/State/Zip) (Telephone #)

GRADUATE OF/YEAR _____ **CURRENT NIU GPA** _____
(High School) (County, State) (Year) (will be verified)

TOTAL CREDITS EARNED TO DATE: _____ **NIU CLASS STANDING** _____
(Jr. Sr.)

EDUCATIONAL PLANS Proposed occupation or profession _____

Major/Intended date of Graduation _____
(Major) (Year)

EXTRACURRICULAR ACTIVITIES List activities/organizations in which you have participated. Indicate positions of leadership.

LIST SPECIAL ACTIVITIES OR HONORS YOU HAVE RECEIVED

LIST ANY HOBBIES AND SPECIAL INTERESTS

500 WORD ESSAY REQUIREMENT

BE CERTAIN TO SUBMIT A ONE –PAGE STATEMENT describing why you deserves the award as well as the role your parent(s) career as a firefighter or EMT has played in your life.

The award for which you are applying is made possible from contributions by loyal alumni and friends of the University. By filling out this form, signing it, and returning it, you will make it possible for us to tell your benefactors (and/or their families or former faculty and staff) something about you. I hereby certify that the information provided in this application is to the best of my knowledge, true, and correct. I have not knowingly withheld any facts that could otherwise jeopardize consideration of application. I further understand that my academic, judicial, financial, and any other pertinent records will be verified by the appropriate school and university offices.

DATE _____ **SIGNATURE** _____

APPLICATION, TRANSCRIPT, AND STATEMENT**MUST BE RECEIVED BY February 1, 2009**

SUBMIT TO:

Office of Scholarship Coordination/Scholarship Svcs
245K Swen Parson Hall
DeKalb, IL 60115
815/753-4829 PH; 815/753-4145- FAX

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