



# CHICAGO POLICE AND FIRE DEPARTMENTS TUITION SCHOLARSHIP PROGRAM FORM

Families should complete this form when applying for admission or as soon as possible thereafter.

Please submit form and direct general questions to the Office of Undergraduate Admission • 312.567.3025 • admission@iit.edu  
10 West 33rd Street • Perlstein Hall Suite 101 • Chicago, IL 60616 • admission.iit.edu • fax: 312.567.6939

PLEASE PRINT OR TYPE

Student's Full Name: Last/ Surname \_\_\_\_\_ First Name \_\_\_\_\_ M.I. \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Current School: \_\_\_\_\_

Entry Term: Fall: \_\_\_\_\_ Spring: \_\_\_\_\_ Year: \_\_\_\_\_

Student Above is a:

- Child of A Member of the Chicago Fire Department
- Child of A Member of the Chicago Police Department
- Grandchild of A Member of the Chicago Fire Department
- Grandchild of A Member of the Chicago Police Department

Parent or Grandparent's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Rank: \_\_\_\_\_ File or Star Number: \_\_\_\_\_

Current House/ Office or District/ Area Name (or last before retirement): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Supervising Officer (Please Print Name): \_\_\_\_\_ Telephone: \_\_\_\_\_

Title: \_\_\_\_\_ Signature: \_\_\_\_\_