

STARKE COUNTY
COMMUNITY
FOUNDATION
A FUND AFFILIATE OF NICF

Physicians Hospital System
Visionary Scholarship

2012



NORTHERN INDIANA
COMMUNITY
FOUNDATION
STARKE FULTON MIAMI

Northern Indiana Community Foundation, Inc.
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The Northern Indiana Community Foundation, Inc. administers a scholarship program that each year helps local students pursue higher education. We hope to add you to our list of scholarship recipients! If you need additional assistance, please contact Corinne Becknell Lucas, Scholarship Coordinator for the Northern Indiana Community Foundation (NICF) at 574.223.2227 or toll free at 877.432.6423. You can also email questions to corinne@nicf.org. **You can find this application online at nicf.org.**

Physicians Hospital System Visionary Scholarship: Physicians Hospital created this scholarship to benefit students in Starke or Marshall County Indiana High Schools. There will be two one-time \$1,000 scholarships given, one to a student from each county.

Eligibility Requirements: Graduating senior of any Starke or Marshall County High School accepted into an accredited 4 or 2 year college, university or vocational school planning to pursue a degree in a health care related field. Top 20% of their graduating high school class; involved in school and community activities; financially deserving.

Please Make Sure the Following documents are completed and attached.

- Provide a quality wallet size photo with your name on the back of the photo.
- Application Information Part A
- Application Information Part B
- Estimated Expenses & Resources
- Essay Question.
 - Submit 100-250 words to the following topic: In your own words, explain what a visionary is to you.
- One official school transcript is required. The Foundation will make additional copies as needed.
 - If you are a student entering your first year of college, please attach your high school transcript
 - If you are a college student, please attach your college transcript.
- FAFSA's Student Aid Report (SAR). EFC (Expected Family Contribution) number must be included.
 - Helpful tip: Check out the Indiana College Costs Estimator at <http://www.indianacollegecosts.org/>. This site answers many questions you may have before completing the FAFSA. It's easy and it's free. You will still need to complete the FAFSA, but this is just another helpful tool

Instructions for completing the application

1. Applications should be **typed or legibly printed in ink**.
2. Attach all required documents.
3. Only **one official school transcript** is required. The Foundation will make additional copies as needed.
4. **Scholarship Essay Question**
 - Submit your response on a separate sheet of plain white paper.
 - Include your name on the top left of the page and the name of the scholarship you are applying for on the top right of the page.
5. **Submit one original application and all required attachments.** The NICF office will make all necessary copies.
6. **Do not use staples.** Use only paper clips or clamps to attach your application materials to each other. Organize your application and all required materials.
7. By the deadline, give the manila envelope that contains your application and all required attachments to the guidance department of your high school.

Application must be in the Guidance Dept. office by March 12th 2012.

Application Information Part A

Name _____

Address _____

Male Female Date _____ of Birth _____

Office use only

Home Telephone Number _____ Cell _____ Phone Number _____

Email address _____ Facebook _____ Name _____

Place of Birth _____ Number of years residing in Indiana _____

Are you a US Citizen? Yes No

Family Information

I am _____ Single Married Separated/Divorced

Name of spouse _____

Number of dependants? _____

Father's / Guardian's Name _____

Address (if different from you) _____

Occupation _____ Firm _____ Name _____

Mother's / Guardian's Name _____

Address (if different from you) _____

Occupation _____ Firm _____ Name _____

Education Information

High School _____ Graduation _____ Date _____ # _____ of Year's attended _____

Year in college in the coming academic year: Fresh. Soph. Jr Sr. Grad. School Other

1st Generation College Student Yes No Enrollment Status: Full-time Part-time Other

Educational institution you attend or plan to attend _____ Accepted? Yes No

2nd choice educational institution you plan to attend _____ Accepted? Yes No

Major field of College Study _____

As of this date, do you have a tuition package that pays for more than half of you college tuition per year? Yes No

Estimated Expenses & Resources Part C:

Name of College/University you plan to attend _____

Estimated Resources

Have you received an award letter from this school? If so please attach. If no, please estimate your eligibility to the best of your ability.

| | |
|--|----|
| Parent Contribution | \$ |
| University Scholarship or Grants | \$ |
| Federal Pell Grant | \$ |
| Federal Academic Competitiveness Grant | \$ |
| Federal Supplemental Grant (SEOG) | \$ |
| Indiana Grants | \$ |
| Federal Stafford Loan | \$ |
| Federal Perkins Loan | \$ |
| School Job | \$ |
| Other (specify) | \$ |
| Total Aid | \$ |

Estimated Expenses

| | |
|--|----|
| Tuition & Fees | \$ |
| Room & Board | \$ |
| Books & Supplies | \$ |
| Transportation | \$ |
| Personal Expenses (e.g. laundry, clothing, etc.) | \$ |
| Total Costs | \$ |

Do you have any other expense of which you would like to make us aware?

If your estimated expenses exceed your financial aid, how do you plan to pay the difference?

Optional Special Circumstances: Please describe any special circumstances you or your family are experiencing.

Name of Student: _____

Academic Certification and Signature Form:

This Section to Be Completed By a High School Guidance Counselor

Diploma:

The student will graduate with the following:

Reg. Diploma _____ CORE 40 _____ Technical Honors _____ Academic Honors _____

Advanced Placement Classes:

Number of College Prep, Honors, Advanced Placement, Weighted Courses offered at this high school: _____

Number taken by student: _____

General Testing and Scholarship:

Did this student pass both required sections of the ISTEP GQE? _____ Yes _____ No

21st Century Scholar? _____ Yes _____ No Likely to be a recipient of the award? _____ Yes _____ No

Required Test and SAT/ACT Scores & Cumulative GPA:

Only complete if information is not on the student's transcript

Highest SAT Scores: Critical Reading _____ Math _____ Writing _____ Total: _____

Highest Composite ACT Score: _____

GPA _____ on a scale of _____ Class Rank _____ Class Size _____

Guidance Counselor Signature

Date

This Section to Be Signed by the Student

In signing this application, I hereby certify that the information is complete and accurate to the best of my knowledge. I have fulfilled all of the requirements for the application and I am enclosing required attachments as requested on the **instructions page and the scholarship description sections** of this document. I am aware that the Northern Indiana Community Foundation scholarships may be used at an accredited education institution. I also understand that the awards will be announced in the spring and summer of 2012. In addition, I understand that the information contained in my application may be shared with the scholarship committee and / or the scholarship fund founder. If you are under 18 years of age, a parent's signature is required.

Applicant's Name (please print)

Applicant's Signature

Date

Parent's Signature

Date