

FULTON COUNTY
COMMUNITY
FOUNDATION
A FUND AFFILIATE OF NICF

2020

The Ginger Miller Higher Education
Fund Scholarship



NORTHERN INDIANA
COMMUNITY
FOUNDATION
STARKE FULTON MIAMI

Northern Indiana Community Foundation, Inc.
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Ginger Miller lived in the Rochester community for 35 years. Originally from West Springfield, Massachusetts, she graduated from Cuyahoga Falls High School, Cuyahoga Falls, Ohio. Ginger attended Piedmont College, Demorest, Ga. where she earned a Bachelor of Arts in English and Sociology. In 1994, she earned a Master of Science degree in Management from Indiana Wesleyan University, Kokomo.

Ginger served the community through many organizations. She was the director of the Welfare Department; co-owned and was the assistant to the administrator of the former Canterbury Manor Nursing Home, presently known as Life Care Center; and served Woodlawn Hospital as Director of Social Services, Volunteer Services and Discharge Planning. She established Diversified Consulting, being owner and Chief Executive Officer. In addition to her consulting business, she was appointed director of the Fulton County Wellness Center.

Ms. Miller served on many boards such as the Board of Directors for the Single Parent Program, Big Brothers Big Sisters, Woodlawn Hospital Auxiliary, the Community Resource Center, Community Service Welfare Board, Step Ahead, Fulton County AIDS Taskforce, Fulton County Cancer Society, and Ancilla College. She was also the President of Fulton County Community Foundation and Northern Indiana Community Foundation, Inc. and well as the Fulton County Corrections Board. She also instituted the Social Service Block Grant for Single Mothers.

The Ginger Miller Higher Education Scholarship

The Ginger Miller Higher Education Scholarship provides scholarships for qualified college graduates pursuing graduate or professional school degrees. Ginger Miller had a love of education and shared this passion with others throughout her life. This scholarship was created to celebrate spirit of community and education.

Eligibility Requirements

1. Must be a resident of Fulton County, Indiana
2. Must be accepted into a postgraduate studies program
3. Must have graduated from college with a Cumulative GPA of a "B" or Higher and must currently have a Cumulative GPA of a "B" or higher if currently a graduate or doctorate student.
4. Must show financial need

Reapplication requirements: To apply for renewal of said scholarship, recipients must:

1. Write a letter to the Northern Indiana Community Foundation by the application deadline July 1st of each year requesting the Committee to consider renewal of said scholarship;
2. Attach a statement on the course of study you completed the previous year;
3. Attach your course schedule for the new year; and,
4. Show proof of academic eligibility (Must maintain a "B" or higher GPA during graduate studies.) Failure of any recipient to maintain such academic achievement and eligibility shall forfeit and terminate any entitlement to, or interest in this scholarship.

Please Make Sure the Following documents are completed and attached.

- Completed Scholarship Application
 - o Part A and Part B
- Transcript of most recent college transcript (Proof of Academic Eligibility)
- FASFA's Student Aid Report (SAR), which is the report FASFA returns to you, including the EFC (Expected Family Contribution) number.
- Three (3) Letters of Recommendation
 - o (1-Community Member; 2-Academic Instructors—current or former)
- College/University Acceptance Letter for Postgraduate Studies

Submit one original application and all attachments. The NICF office will make all necessary copies.

Please return the application to the Northern Indiana Community Foundation office at P.O, Box 807, 227 E. 9th Street, Rochester, IN 46975.

Applications must be in the NICF office by **July 1, 2020.**

Application Information Part A

Name _____
 First Middle Last

Address _____

Male Female _____ County of Residence _____

Number of years residing in Indiana _____ Number of years residing in county _____

Date of Birth _____ Home Telephone Number _____

Email address _____ Cell Phone Number _____

High School Information

High School _____ Location _____ Graduation/GED Date _____

Undergraduate Information

College or University Attended	Location	Attendance Dates	Credit Hours/Cum. GPA	Degree Earned and Date Received

Postgraduate Studies Information For Up-Coming Year

Year of study 1 2 3 4 Full-time Part-time Less than part-time _____

Subject area, program, or degree you plan to pursue: _____

Student is Accepted Pending Enrolled _____ Anticipated Graduation Date _____

State your educational plans as they relate to you and your career goals, Include some of the points you would like the Foundation to member about you when reviewing all the scholarship applications. _____

Do your goals include retuning to the Fulton County community after you complete your degree? _____

Work Experience

Company	Company Address	Dates employed		Position Held
		From	To	

Application Information Part B

Family and Scholarship Information Summary

Father's Name _____
Last First M/ I

Mother's Name _____
Last First M/ I

Father deceased Mother deceased Parents divorced Parents Separated

Applicants Marital Status Single Married Separated Divorced Widowed Other

Applicant Resides With _____ Relationship to Applicant _____

How many people currently in your household? _____ Ages of other children in your family _____

Number of family members in college _____ Were you a 21st Century Scholar? Yes No

State any unusual family, personal or financial circumstances you feel warrant attention by the Foundation. _____

Have you applied for financial assistance at the college you plan to attend? Yes No

Please list all scholarships/grants along with amounts that you have applied for and received. _____

Student Budget Information

Tuition and fees	\$ _____	Parent contribution	\$ _____
Books and supplies	\$ _____	Student contribution	\$ _____
Room and board	\$ _____	Spouse contribution (if independent student)	\$ _____
Personal expenses	\$ _____	VA or SS benefits	\$ _____
Transportation	\$ _____	Other aid (Pell grant, work study, etc.)	\$ _____
Other (list):	\$ _____	Other (list):	\$ _____
Other (list):	\$ _____	Other (list):	\$ _____
Other (list):	\$ _____	Other (list):	\$ _____
Total Estimated Budget	\$ _____	Total Anticipated Resources	\$ _____

Certification

I certify that the information on this form is true and compete to the best of my knowledge. If asked by the Northern Indiana Community Foundation for more information to documents the data given on this form, I do agree to do so. I realize that this proof may include a copy of a federal tax return. I realize that failure to comply with a request for more information that I it may prevent my application from being consider for scholarships. I also understand that falsification of any information may result in the termination of the scholarship.

Applicant's Signature _____ Date _____