

Northern Indiana Community Foundation, Inc.  
**THE GINGER MILLER HIGHER EDUCATION  
FUND SCHOLARSHIP**

This scholarship fund was created to provide scholarships for qualified college graduates pursuing graduate school or professional school, who are **residents of Fulton County, Indiana**, deserving of financial assistance and who have been accepted for graduate studies. All applicants must have graduated from college with a “B” or higher cumulative GPA in order to apply for this scholarship.

First year recipients must submit to the Northern Indiana Community Foundation a copy of his/her graduate school or professional school acceptance letter when applying for this scholarship.

To apply for renewal of said scholarship, recipients must:

1. Write a letter to the Northern Indiana Community Foundation by August 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.

**SCHOLARSHIP SELECTION PROCESS:**

The Ginger Miller Higher Education Fund Scholarship Committee shall make the selection of all scholarship recipients.

<b>Return Application To Address</b>	<b>Northern Indiana Community Foundation, Inc. P.O. Box 807 800 Main Street Rochester, IN 46975</b>
<b>Phone</b>	<b>1-574-223-2227 or toll-free at 1-877-432-6423</b>
<b>Fax</b>	<b>1-574-224-3709</b>
<b>Website</b>	<b>www.nicf.org</b>
<b>Date Applications Available</b>	<b>January of Each Year</b>
<b>Dollar Amount</b>	<b>To Be Announced</b>
<b>Application Deadline</b>	<b>Monday, September 8, 2008</b>

**REQUIRED ATTACHMENTS**

**Completed Scholarship Application (Pages 1-2)  
Completed Financial Assistance Questionnaire (FAQ – Pages 3-4)  
Copy of most recent Federal Income Tax Return (IRS 1040) (First Page Only)  
Transcript of most recent college transcript (Proof of Academic Eligibility)  
Three (3) Letters of Recommendation (1-Community Member; 2-Academic Instructors—current or former)  
College/University Acceptance Letter for Postgraduate Studies**

**SUMMARY OF ELIGIBILITY  
AND QUALIFICATIONS**

- **Must be a resident of Fulton County, Indiana**
- **Must be accepted into a postgraduate studies program**
- **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.**
- **Must show financial need**



Have you applied for financial assistance at the college you plan to attend?				<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Have you applied for any other scholarships or grants (private, local organizations)?				<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
If "Yes", list below							
Source			Amount Received	Granted	Pending		
<b>Expenses and Resources</b>							
Estimated Expenses				Resources			
Tuition & Fees	\$			From Employment	\$		
Books & Supplies	\$			From Personal Savings	\$		
Room & Board	\$			From Parent/Relatives	\$		
Transportation & Personal	\$			Scholarships (known)	\$		
Other				Other			
Total \$				Total \$			
<b>Applicant's Living Parents</b>							
Father's Name							
Mother's Name							
Marital Status <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widow/Widower <input type="checkbox"/> Other							
Applicant Resides With					Phone #		
Relationship to Applicant							
Permanent Mailing Address							
City			State			Zip	
Have you previously applied for a Fulton County Foundation scholarship?					When?		
Have you previously been awarded a Fulton County Foundation scholarship?					When?		
<b>Work Experience</b>							
			Dates Employed				
Company			From	To	Position Held		
Address							
Company							
Address							
Company							
Address							
Company							
Address							
<b>Your Application Checklist</b>							
In support of this application, I have completed and enclosed:							
<input type="checkbox"/> Completed Scholarship Application (pages 1-2)							
<input type="checkbox"/> Completed Financial Assistance Questionnaire (FAQ – pages 3-4)							
<input type="checkbox"/> A copy of the first page of most recent Federal Income Tax Return (IRS 1040)							
<input type="checkbox"/> Transcript of most recent college transcript (Credit Hours & Cumulative GPA)							
<input type="checkbox"/> Three (3) Letters of Recommendation (1-Community Citizen; 2-Teacher or Professor)							
To the best of my knowledge the information reported herein is complete and correct.							
Applicant Signature					Date		

**MAIL COMPLETED APPLICATION TO:**  
**Program/Scholarship Coordinator**  
**Northern Indiana Community Foundation, Inc.**  
**P.O. Box 807**  
**Rochester, IN 46975**

**Application Deadline:**  
**Monday, September 8, 2008**



<b>Part Four: Asset Information</b>					
<b>PARENTS—If applicable.</b>			<b>APPLICANT (AND SPOUSE)</b>		
	What is it worth now?	What is owed on it?		What is it worth now?	What is owed on it?
Cash, savings and checking accounts	\$		Cash, savings and checking accounts	\$	
Other real estate and investments (not including primary family residence)	\$	\$	Other real estate and investments (not including primary family residence)	\$	\$
<b>Part Five: Household Information</b>					
<b>PARENTS—If applicable.</b>			<b>APPLICANT (AND SPOUSE)</b>		
The age of the older parent is [     ]			The total size of the student's household during this year will be (include the student, student's spouse and dependent children. Include other people only if they meet IRS definition of dependent.)		
The total size of the parent's household during this year will be (include the student even if he/she does not live at home. Also include parents and parents' other dependent children.)					
Of the number in household above, how many will be in college during this year (include the student who is applying for aid and others who will be in college FULL TIME.)			Of the number in household above, how many will be in college during this year (include the student who is applying for aid and others who will be in college FULL TIME.)		
<b>CERTIFICATION:</b> All of the information on this form is true and complete to the best of my knowledge. If asked by an authorized official, I agree to give proof of the information that I have given on this form.					
Student's Signature			Spouse's Signature		
Parent's Signature—If applicable.					

**ATTACH A COPY OF PARENT/LEGAL GUARDIAN'S FEDERAL TAX FORM 1040 CLAIMING YOU AS A DEPENDENT, OR IF NOT CLAIMED AS A DEPENDENT, INCLUDE A COPY OF APPLICANT'S FEDERAL TAX FORM 1040.**

**All information provided on this form is confidential and will be treated as such by the Northern Indiana Community Foundation, Inc.**

**APPLICATION DEADLINE: MONDAY, SEPTEMBER 8, 2008**