

FULTON COUNTY  
COMMUNITY  
FOUNDATION  
A FUND AFFILIATE OF NICF

2010

Elmer Harris & Beulah P. Harris Scholarship  
Winamac High School



NORTHERN INDIANA  
COMMUNITY  
FOUNDATION  
STARKE FULTON MIAMI

**Northern Indiana Community Foundation, Inc.**  
P. O. Box 807, 715 Main Street, Rochester, IN 46975  
Phone: (574) 223.2227 • Toll Free: (877) 432.6423  
Fax: (574) 224-3709 • [terri@nicf.org](mailto:terri@nicf.org) [www.nicf.org](http://www.nicf.org)  
Corinne Becknell Lucas, Program/Scholarship Coordinator  
[corinne@nicf.org](mailto:corinne@nicf.org)

**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! Featured on the pages of this publication are scholarships offered by the Fulton County Community Foundation through a competitive application process. Please read the description of each one to see if you are eligible to apply. The application can be found online at [nicf.org](http://nicf.org).

### **Elmer Harris & Beulah P. Harris Scholarship:**

Bea was a homemaker, resident of Kewanna, and member of the Pleasant Grove United Methodist Church.

### **Eligibility**

Resident of Union Township (Caston, Winamac and Rochester High Schools) in Fulton County and plan to attend a trade school, college or any other accredited institution of higher learning. Good citizenship is an important criterion.

### **Attachments**

- Application Information Part A
- Application Information Part B
- One Letter of Recommendation
- Essay Question:
  - Briefly describe the person that has been most influential in your life and how they assisted you. Please also express your personal reasons for desiring a post-high school education, as well as your plans after graduation from college.
  - Submit your responses 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.
- Academic Certification Form
- Application Signature Page

1. Applications should be **typed or legibly printed in ink**.
2. Attach all required documents. See the Scholarship Fund Information pages for required document list.
3. Only **one official school transcript** is required. The Foundation will make additional copies as needed.
4. Provide a quality **wallet size photo** with your name on the back of the photo.
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. **Place your application and attachments in a yellow manila envelope. Put your name and contact information on the outside of the envelope.** If you do not have a manila envelope, please ask your High School Guidance Dept. for an envelope and one will be provided to you.
8. By the deadline, give the manila envelope that contains your wallet size photo, application cover page, completed application, transcript, SAR and additional materials required to the guidance department of your high school.

**For further assistance contact Corinne Becknell Lucas, Scholarship/Program Coordinator for the Northern Indiana Community Foundation at 574.223.2227 toll free at 877.432.6423 or at [corinne@nicf.org](mailto:corinne@nicf.org).**

# Application Information Part A

Name			
_____	_____	_____	_____
_____	_____	_____	_____
Legal Address			Office use only
_____			
City / State / Zip			
_____			
Mailing Address (if different from above)			
_____			
City / State / Zip			
_____			
<input type="checkbox"/> Male <input type="checkbox"/> Female		Township of Residence	
_____		_____	
Number of years residing in Indiana		Number of years residing in your township	
_____		_____	
Date of Birth		Home Telephone Number	
_____		_____	
Email address		Cell Phone Number	
_____		_____	
Father's / Guardian's Name			
_____	_____	_____	_____
_____	_____	_____	_____
Address (if different from you)			
_____			
City / State / Zip			
_____			
Occupation		Firm Name	
_____		_____	
Mother's / Guardian's Name			
_____	_____	_____	_____
_____	_____	_____	_____
Address (if different from you)			
_____			
City / State / Zip			
_____			
Occupation		Firm Name	
_____		_____	
High School		Graduation Date	# of Year's attended
_____		_____	_____
Elementary School (list school name and dates attended)			
_____			
_____			
Year in college in the coming academic year: <input type="checkbox"/> Fresh. <input type="checkbox"/> Soph. <input type="checkbox"/> Jr <input type="checkbox"/> Sr. <input type="checkbox"/> Grad. School <input type="checkbox"/> Other			
_____			
1 <sup>st</sup> Generation College Student <input type="checkbox"/> Yes <input type="checkbox"/> No		21 <sup>st</sup> Century Scholar <input type="checkbox"/> Yes <input type="checkbox"/> No	
_____		_____	
Enrollment Status: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Other		Enrolled in the Military? <input type="checkbox"/> Yes <input type="checkbox"/> No	
_____		_____	
1 <sup>st</sup> choice educational institution you plan to attend		Accepted? <input type="checkbox"/> Yes <input type="checkbox"/> No	
_____		_____	
2 <sup>nd</sup> choice educational institution you plan to attend		Accepted? <input type="checkbox"/> Yes <input type="checkbox"/> 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? <input type="checkbox"/> Yes <input type="checkbox"/> No			
_____			



Name of Student: \_\_\_\_\_

**Academic Certification 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

21<sup>st</sup> 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: Writing \_\_\_\_\_ Math \_\_\_\_\_ Critical Reading \_\_\_\_\_ Total: \_\_\_\_\_

Highest Composite ACT Score: \_\_\_\_\_

GPA \_\_\_\_\_ on a scale of \_\_\_\_\_ Class Rank \_\_\_\_\_ Class Size \_\_\_\_\_

---

**Guidance Counselor Signature**

**Date**

**This Section to Be Completed By Applicant If They Are a Non-Traditional Student:**  
*You must still attach a copy of your most recent high school or college transcript*

GED recipients: Score on Section #1 #2 #3 #4 #5 Total Score: \_\_\_\_\_

GPA \_\_\_\_\_ on a scale of \_\_\_\_\_ Class Rank \_\_\_\_\_ Class Size \_\_\_\_\_

Sat Score: Writing \_\_\_\_\_ Math \_\_\_\_\_ Critical Reading \_\_\_\_\_ Total \_\_\_\_\_ ACT Score composite \_\_\_\_\_

---

**Student Signature**

**Date**

## Application Signature Page

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 **instruction and scholarship description section** 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 2010. 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

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

**Application deadline is March 15<sup>th</sup> 2010**