HCCF Scholarship Application - NEW

PROGRAM DEADLINE: August 30 2023 at 03:00 PM EDT

General Instructions - Please read! The Hendricks County Community Foundation online scholarship application must be completed by 3pm on August 30, 2023. NOTE: This application is also used for the Lilly Endowment Community Scholarship. Pay special attention to the LECSP Certification section at the end if you wish to be eligible for the Lilly Scholarship. Applications must be submitted online through SmarterSelect. Each of the Community Foundation's scholarships are different and prioritize different things including the Lilly Scholarship. You can find the rubric for the Lilly Scholarship here. We recommend completing and submitting your application early to allow for any issues and troubleshooting that may arise. There is a section where your guidance counselor will need to submit some academic data directly to your application. You will be asked to enter their name and email address. Please double check that you have entered their email address correctly. We recommend notifying them that they should receive an email from SmarterSelect requesting their response. This email should be delivered shortly after you submit their information. If the email was not received in their inbox, please follow these steps: 1) Double check that you have correctly entered their email address in the application. 2) Ask them to check their Junk/Spam folder to see if the email was mistakenly placed there. 3) Finally, contact Eric Hessel at eric@hendrickscountycf.org. You may exit this application and come back to continue working at any time before the deadline. If you are having trouble after returning to the application, you may need to click the green button in the upper right corner that says "Edit Application". Be sure to save your changes each time before you leave. Late or incomplete applications WILL NOT be considered.

Contact Information

Contact Information

irst Name *	
Aiddle Name	
.ast Name *	
Suffix (Jr, Sr, III, et	c.)
Date of Birth (MM	DD/YYYY) *
· · ·	
Clear	
Vhat county do y	u live in? *
C Hendr	cks
Other residents.	Generally, HCCF Scholarships are only available to Hendricks County
chool in Hendrick	rment Community Scholarship, non-Hendricks County residents MAY be eligible IF they 1) atten s County and 2) are not eligible for the Lilly Scholarship in their home county because they atte s County OR are disqualified due to length of residency.
Vhat township do	you live in? *
street Address *	
City *	
itata *	
State * Select one	

Zip Code *	
Primary Phone Number (XXX-XXX) *	
Other Phone Number (XXX-XXXX)	
Email Address *	1

Dem	ographics
This s truthi	ection is hidden from reviewers, please answer these questions completely and fully.
Gende	r *
	O Woman
	O Man
	C Non-binary
	C Other
If othe	r, please specify:
How w	rould you describe yourself? (Select all that apply.) *
11011	
	American Indian or Alaska Native
	Asian or Asian American
	Black or African American
	Hispanic or Latino
	Native Hawaiian or other Pacific Islander
	White or Caucasion
lf othe	r, please specify:
Are yo	u a first-generation college student? *
	C Yes
	Ô No
	a first-generation student means that your parent(s) did not complete a 4-year college or university degree, lless of other family member's level of education.
Are yo	u a foster child, orphan, part of a single-parent home, or have a $parent(s)$ that is incarcerated? st
	C Yes
	C No
Are yo	u an immigrant, refugee, or child of an immigrant or refugee? *
	C Yes
	🔘 No

nis section is hidden from reviewers, please a uthfully.	answer these questions completely
rent/Guardian #1 Full Name *	
arent/Guardian Contact Number *	
rent/Guardian Email Address *	
irent/Guardian #2 Full Name	

inancial Need is ONLY considered for the Lilly Sch scholarship you may skip this question.	nolarship. If you are not applying for the Lilly
f you ARE planning to apply for the Lilly Scholarsh nformation. If you choose not to answer BOTH of 1 0) out of the ten (10) total points possible for this	the following questions, you will receive zero
/hat is your family's Adjusted Gross Income for the mos n IRS Form 1040, line 11 .	t recent tax year? Adjusted gross income appears
5	
How many people are part of your household including y	ou?

High School	
Name of High School *	
Upon graduation, how many FULL years will you have attended the high school from which you will graduate? *	
O 1	
Ô 2	
O 3	
○ 4	

Higher Education Goals

Educational Institution you plan to attend:

To be considered for the Lilly Endowment Community Scholarship, one of your two choices on this page MUST be a college or university in the State of Indiana.

First Choice *

If you want to be considered for the Lilly Endowment Community Scholarship, one of your two choices on this page MUST be a college/university in Indiana.

Second Choice

Intended m	
	Agriculture
	Architecture
	Building Trades
_	Business and Management
Г	Communication
Г	Computer and Information Sciences
_	Construction
	Construction - Design
	Construction - Management
Γ	Construction - Technology
	Criminal Justice
_	Economics
	Education
	Education - Art
	Education - Elementary
	Education - Math
	Education - Special
	Engineering
	Engineering - Civil
	Engineering - Electrical
	Engineering - Mechanical
	English
	Finance and Accounting
	History
	Interior Design
	Journalism
	Nursing
	Pharmacy
	Political Science
	Pre-Law/Law
	Pre-Med/Medicine
	Psychology
	Real Estate
	Undecided
	Visual and Performing Arts
	Vocation/Trades
	Other

Intended career *

Do you currently plan to continue your education beyond an undergraduate degree? i.e. Master's or Doctorate \ast

C Yes C No

Academics

Instructions

Academic verification from your guidance counselor is due by 3pm August 30, 2023.

When you fill in the information for your guidance counselor, please note that an Email will be immediately sent to the Email address provided. <u>PLEASE DOUBLE-CHECK THE EMAIL ADDRESS</u> <u>YOU ENTER.</u>

We strongly encourage you to notify your guidance counselor that they should have received an automated Email from @smarterselect.com requesting their response. If the Email was not received in their Inbox, please ask them to check their Junk folder to see if the Email was mistakenly placed there.

It is YOUR responsibility to make sure your recommendation is submitted by the deadline. You may see the status of your recommendation requests through your user account.

Guidance Counselor Information Request

When you fill in the information for your Guidance Counselor, please note that an email will be immediately sent to the email address provided. We strongly encourage you to notify your Guidance Counselor that they should have received an e-mail from automated.email@smarterselect.com requesting their response. If the e-mail was not received in their Inbox, please ask them to check their Junk folder to see if our e-mail was mistakenly placed there. Use this Guidance Counselor Cheat Sheet to make sure you have the correct information entered below. Academic verification is due August 30, 2023. It is the applicant's responsibility to make sure the Guidance Counselor submits the information by the deadline. You may see the status of your academic verification request through the user account. HCCF recommends immediately verifying whether or not your Guidance Counselor has received the email from SmarterSelect.

Guidance Counselor's First Name *

Guidance Counselor's Last Name *

Guidance Counselor's Email *

School Activities

School Activities

School activities are those done at or through your high school including sports, arts, or clubs. If the activity has a coach, leader, or sponsor paid for by the school, then it is considered a school activity.

You will have an opportunity to describe your participation in a total of five (5) school activities below. You'll want to choose the activities that you have participated in the longest, held leadership roles or represented to the community, and have had the most far reaching impact because of your participation.

Name of activity

How many years of high school have you participated in this activity?

- **O** 1
- 0 2
- Оз

Please describe your participation in this activity; not just what the activity is but what YOU did as part of it.

What leadership roles have you held? Have you represented this activity in or to the community? How has YOUR participation in the activity made an impact on:

Your school? Your community? Beyond your community?

Name of activity

How many years of high school have you participated in this activity?

- **O** 1
- 0 2
- Оз

Please describe your participation in this activity; not just what the activity is but what YOU did as part of it.

What leadership roles have you held? Have you represented this activity in or to the community? How has YOUR participation in the activity made an impact on:

Your school? Your community? Beyond your community?

Name of activity

How many years of high school have you participated in this activity?

- **O** 1
- 0 2
- Оз

Please describe your participation in this activity; not just what the activity is but what YOU did as part of it.

What leadership roles have you held? Have you represented this activity in or to the community? How has YOUR participation in the activity made an impact on:

Your school? Your community? Beyond your community?

Name of activity

How many years of high school have you participated in this activity?

- **O** 1
- 0 2
- Оз

Please describe your participation in this activity; not just what the activity is but what YOU did as part of it.

What leadership roles have you held? Have you represented this activity in or to the community? How has YOUR participation in the activity made an impact on:

Your school? Your community? Beyond your community?

Name of activity

How many years of high school have you participated in this activity?

1
2
3
Please describe your participation in this activity; not just what the activity is but what YOU did as part of it.
What leadership roles have you held? Have you represented this activity in or to the community?
How has YOUR participation in the activity made an impact on:
Your school?
Your community?
Beyond your community?
Have you received substantial recognition for your participation in this activity including at your school, beyond school, or state or nationwide?

Outside Activities

Outside Activities

The Community Foundation recognizes that there are a variety of valuable activities applicants can do OUTSIDE of school including Community Activities, Community Service, Faith, Responsibilities at Home, and Work.

You will have an opportunity to describe your participation in each of these five (5) categories below.

Community Activities

Estimate the average number of hours you spend on Community Activities each WEEK.*Examples of Community Activities include 4-H, Boys/Girl Scouts, Indianapolis Children's Choir, community theater, club sports etc.*

(0 to 50)

Please describe your Community Activities including what activities you've included, your participation in the activities and the impact that your participation had on you, your family, your school, your community, or beyond.

Community Service/Volunteer

Estimate the average number of hours you spend on Community Service and/or volunteering in your community each WEEK. *This can be traditional community service or things like unpaid tutoring for a neighbor or mowing an elderly neighbor's grass for free.*

(0 to 50)

Please describe your Community Service/Volunteerism including what activities you've included, your participation in the activities and the impact that your participation had on you, your family, your school, your community, or beyond.

Faith

Estimate the average number of hours you spend in and with your Faith community each WEEK.

(0 to 50)

Please describe your work and participation in your Faith community including what activities you've included, your participation in the activities and the impact that your participation had on you, your family, your school, your community, or beyond.

Responsibilities at Home

Estimate the average number of hours you spend on Responsibilities at Home each WEEK. *This should not include regular or weekly chores, but may include things like caring for sibling or relative while parents work in the evening.*

(0 to 50)

Please describe your Responsibilities at Home including what activities you've included, your participation in the activities and the impact that your participation had on you, your family, your school, your community, or beyond.

Work

Estimate the average number of hours you spend on Work each WEEK. *This typically should be considered PAID work; however, you may include unpaid internships or unpaid work with a family member.*

(0 to 50)

Please describe your Work including what activities you've included, your participation in the activities and the impact that your participation had on you, your family, your school, your community, or beyond.

Personal Statement

Please provide a personal statement between 200 and 400 words. Do not waste this opportunity to tell the committee about yourself in narrative form.

"Imagine we only have one scholarship to give. Tell us about yourself: past accomplishments, current activities, and future goals. What would you describe to be your unique trait or a special skill allowing you to stand out from the rest of the applicants? Why should the committee choose you? Consider any special circumstances that may affect or have affected your life. We receive nearly 500 applications, what makes YOU unique."

To aid in the blind application process, please do not use your name or those of your family members (first, last, nicknames, etc.). *

Min words required: 200 |

Max Number of Words: 400

What's Missing

What's Missing

Please use this section to briefly highlight anything the committee should know that hasn't been highlighted anywhere else in your application or transcript.

If this is not applicable to you, please indicate so by entering N/A. *

Min words required: 0

Max Number of Words: 75

The Community Foundation no longer requests Letters of Recommendation for any of its cholarships including the Lilly Endowment Community Scholarship; however, we do request hat students list two references. The Lilly Scholarship Committee will follow up with eferences for those students who reach the Top 10, interview stage of the program. IOTE: It is appropriate for you to ask your references if you may list them as a reference in this pplication. It should be someone who knows you well that is not an immediate family member r another high school student.		
Reference 1		
irst and Last Name *		
hone Number *		
Reference 2		
hone Number *		
ne sentence statement on how you know the reference. *		

Requirements

Lilly Scholarship Certification (Required for applicant to be considered for the Lilly Scholarship)

If I receive this scholarship, it is my intent to pursue four years of undergraduate study on a full-time basis leading to a baccalaureate degree at an Indiana college.

I understand that the total maximum amount of my scholarship is calculated on the basis of my chosen college's tuition and required fees beginning with the 2024-25 school year.

To assist with the processing of my scholarship payments each semester or quarter and to avoid late fees as required, I will forward to the Hendricks County Community Foundation immediately upon receipt all invoices for tuition and any eligible fees that may be covered by my scholarship, as required.

I understand that the special allocation provided to me is to be used to pay required books and required equipment for my courses of instruction. I will personally keep receipts and other documentation to verify that the special allocation was used only for this intended purpose and will provide those receipts and documents to Independent Colleges of Indiana upon request. If the amount remaining exceeds \$25, I will return to Independent Colleges of Indiana the balance of the special allocation at the end of each school year.

I agree to notify Independent Colleges of Indiana of any scholarship awards I may receive for tuition or required fees from a source other than the Lilly Endowment Community Scholarship.

I will keep the Hendricks County Community Foundation apprised annually by June 1st of my enrollment and academic status during college by completing and returning any surveys or forms as may be provided.

Upon graduation, I will keep the Hendricks County Community Foundation apprised annually by June 1st of my education and/or employment status for at least ten years after graduation by completing and returning an alumni survey or other forms as may be provided by the community foundation.

I wish to apply for the Lilly Endowment Community Scholarship and thereby accept these terms. (NOTE: You must select "Yes" to be considered for the Lilly Endowment Community Scholarship.)

- C Yes
- C No

To be considered for the Lilly Scholarship, the applicant must accept these terms by clicking YES.

Interviews: The Community Foundation Scholarship Committee will hold interviews on<u>Saturday,</u> <u>October 28, 2023</u>. If you are selected for an interview, you will be notified by Friday, October 13, 2023.

The interview date is firm and very important. Please mark your calendar now!

Recipients of this scholarship must decide where they will be attending college and notify the Community Foundation of that decision by May 1, 2024.

I have read and acknowledge the information above.

0	Yes
О	No

HCCF Scholarship Certification and Submission
I certify the information provided in the online application is, to the best of my knowledge, true and correct. If the information provided is found to be false or untrue, your application will be rejected or your scholarship revoked.
Initial below. *
I certify that I am not a family member (including spouse, brothers and sisters by whole or half blood, ancestors, children, stepchildren, grandchildren, great grandchildren) of a person who is in a position to exercise substantial influence over the scholarship selection process, including the HCCF Board Chair, the President & CEO and any other staff members who work directly with the scholarship selection process, and members of Scholarship Advisory Committees for the scholarships for which I am applying.
Initial below. *
I authorize, if selected to receive a scholarship, the Hendricks County Community Foundation may use my name, photograph and any other information for press and media purposes.
Initial below. *

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