Hendricks County Community Foundation's Universal Application - Class of 2027

Hendricks County Community Foundation

Personal Information

Applicant ID*

Enter the last four digits of your phone number and your first and last initial.

Example: 1234MH

Character Limit: 6

The demographic questions below are asked to understand your life circumstances and who is applying for scholarships in our community. They will not be shared with our evaluation committees.

Gender*

Choices

Woman
Man
Non-binary
Gender Not Listed Here (enter below)
Prefer Not to Answer

Gender - Not Listed Above

Character Limit: 50

Race/Ethnicity*

How would you describe yourself? (Select all that apply.)

Choices

American Indian or Alaska Native
Asian or Asian American
Black or African American
Hispanic or Latino
Middle Eastern or North African
Native Hawaiian or other Pacific Islander
White or Caucasian
Another Identity NOT Listed/Other (enter below)
Prefer Not to Answer

Race/Ethnicity - Other

Character Limit: 75

First-Generation College Student*

Are you a first-generation college student?

Being a first-generation student means that your parent(s) did not complete a 4-year college or university degree, regardless of other family members' level of education.

Choices

Yes
No

Household & Family Circumstances*

Are you a foster child, orphan, part of a single-parent home, or have one or more parents who are incarcerated?

Choices

Yes
No

Child of Veteran(s)*

Are you a child of a veteran(s)?

Choices

Yes
No

Unhoused*

Have you ever experienced being unhoused, or are you currently experiencing housing instability?

The term 'unhoused' refers to individuals who do not have stable, safe, or permanent housing.

Choices

Yes
No

Parent/Guardian Information

Parent/Guardian Full Name	Parent/Guardian Contact Number (xxx)-xxx-xxxx	Parent/Guardian Email Address

County of Residence*

Choices

Hendricks
Boone
Marion
Morgan
Putnam
Montgomery
Other (enter below)

County of Residence - Other

Character Limit: 20

Township of Residence - Hendricks Co. Only

Township of Residence*

Choices

Brown
Center
Clay
Eel River
Franklin
Guilford
Liberty
Lincoln
Marion
Middle
Union
Washington

Life Experiences

Life Experiences*

Some scholarships at the Community Foundation prioritize students with certain life experiences. Please check all that apply.

Choices

I am the relative of a current or former law enforcement officer.
I currently live in a Crossman community.
I have a verified diagnosis of Type 1 Diabetes.
I have a verified diagnosis of a hearing impairment
None of the above.

High School Information

High School Name*

Choices

Avon High School
Brownsburg High School
Cascade High School
Danville High School
Plainfield High School
Tri-West High School
Other (enter below)

High School Name - Other

Character Limit: 20

Unweighted GPA*

Enter your Unweighted GPA to 2 decimal places.

Character Limit: 20

Weighted GPA*

Enter your Weighted GPA to 2 decimal places.

Character Limit: 20

Guidance Counselor First Name*

Character Limit: 20

Guidance Counselor Last Name*

Character Limit: 20

College Information

Educational Institution you plan to attend: Top Choice Overall*

What is your top college/university choice overall?

Character Limit: 100

Educational Institution you plan to attend: Top Indiana Choice*

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.

If your overall top choice is **not** a school located in Indiana, put your top Indiana choice here.

Character Limit: 100

Degree/Major*

Please choose the closest one to your major. We understand your major may be called something different depending on the college/university you plan to attend.

Please select up to 3.

Choices

Accounting
Actuarial Science
Advertising and Marketing
Agriculture
Animal Science
Animation
Anthropology
Archaeology
Architecture
Art History
Art Therapy
Astronomy
Audio & Video Production
Audiology & Speech Pathology
Automotive Engineering
Aviation
Behavioral Science
Biochemistry
Biology
Biomedical Engineering
Biomedical Science
Bookkeeping
Botany
Building Trades
Business Administration/Management
Chemical Engineering
Chemistry
Child Development
Chiropractic
Cinematography & Film
Civil Engineering
Clinical Psychology
Communications
Computer Aided Design (CAD)
Computer Graphics
Computer Networking
Computer Programming
Computer Science
Construction Management
Cosmetology
Counseling Psychology
Creative Writing

Criminal Justice
Culinary Arts
Dental Hygienist
Dentistry
Developmental & Child Psychology
Early Childhood Education
Economics
Education
Educational Leadership & Administration
Electrical Engineering
Engineering
English
Environmental & Wildlife Management
Environmental Health
Environmental Science
Fashion Design/Merchandising
Finance
Fire Science
Food Science
Forensic Psychology
Forensic Science
Forestry
Game Design
General Studies
Geography
Geology
Graphic Design
Healthcare Administration
History
Holistic Health & Nutrition
Horticulture
Hotel & Hospitality Management
Human Resource Management/Development
Human Services
Illustration
Industrial Design
Information Systems
Information Technology
Interior Design
International Business
International Relations
Journalism
Kinesiology & Exercise Science
Law
Law Enforcement
Legal Studies
Liberal Arts
Linguistics

Marine Biology
Marriage & Family Therapy
Mathematics
Mechanical Engineering
Medical Transcription
Medicine
Mental Health Counseling
Microbiology
Molecular Biology
Museum Studies
Music
Neuroscience
Nursing
Nutrition
Occupational Therapy
Operations Management
Organizational & Nonprofit Management
Organizational Psychology
Parks & Recreation Management
Petroleum Engineering
Pharmacy
Philosophy
Photography
Photojournalism
Physical Education
Physical Therapy
Physics
Political Science
Pre-medical
Psychology
Public Administration/Policy
Public Health
Public Relations
Radio & Television Broadcasting
Radiology Technician
Real Estate
Religious Studies/Theology
Respiratory Therapy
Risk Management & Insurance
School Psychology
Sign Language
Social Work
Sociology
Software Engineering
Special Education
Sports Management
Sports Medicine
Statistics

Structural Engineering
Substance Abuse & Addiction Counseling
Systems Engineering
Technical Writing
Transportation Mechanic
Undeclared/Undecided
Urban Planning
Veterinary Medicine (DVM or Technical Degree)
Web Design
Welding
Wildlife Biology
Zoology
Other (enter below)

Degree/Major - Other
Character Limit: 100

Intended Minor
Character Limit: 100

Intended Career*
Character Limit: 100

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

Choices
Yes
No

Financial Information Question

Financial Information*
Financial Need is considered for ALL scholarship opportunities offered at the Community Foundation. You may choose not to share this information.
Choosing not to provide this information may limit eligibility for need-based scholarships.

If you click "Yes" below, you will be asked for: your Adjusted Gross Income AND the number of members in your household.

I would like to share my financial need information.

Choices
Yes

No

Financial Information Collecting

If you DO NOT want to share this information, go back to the "Financial Information Question" section and select "No."

DO NOT ENTER ZERO (0) IF NOT WANTING TO ANSWER THE QUESTIONS BELOW.

What is your family's Adjusted Gross Income for the most recent tax year?*

Adjusted gross income appears on IRS Form 1040, line 11 (https://www.irs.gov/filing/adjusted-gross-income).

Similarly to the FAFSA, students with divorced parents should enter the AGI of the parent they live with the "majority of the time," or if their parents have joint custody, they should enter the AGI of the parent who provides more support to them financially. If the parent the student lives with "the majority of the time" is re-married, the parent + the step-parent's total AGI should be entered here.

Please double-check this number. ALL students who make it to the Lilly top 10 (the interview portion) will be asked to confirm this. Inconsistencies will be considered false and disqualified.

Character Limit: 20

How many people are part of your household including you?*

This **should be** greater than or equal to one (1).
This **should not be** less than one (1).

Character Limit: 2

Extra Curricular Involvement

Extra Curricular Involvement*

What are you involved in? This is based on your Freshman, Sophomore, and Junior years. (Please check ALL that apply).

Clicking options will open up additional questions to describe your activities. If you do not select any, your activities will not be considered.

School Activities - School activities include sports, clubs, and the arts -- things done at or through school, for example, Student Council, National Honor Society, Sports, Band, etc.
Community Activities - Community activities are organized programs or groups you participate

in outside of school, such as, 4-H, Boys/Girl Scouts, Indianapolis Children's Choir, community theater, club sports, etc.
Community Service/Volunteerism - traditional community service or things like unpaid tutoring for a neighbor or mowing an elderly neighbor's grass for free
Faith - attending your faith's daily/weekly/monthly activities/expectations
Responsibilities at Home - does NOT include regular or weekly chores, but may include things like caring for sibling(s) or relative while parents work in evenings
Work - paid work, unpaid internships, or unpaid work with a family member

Please note: Once you have included an activity once in extracurriculars, do NOT include it again. Your activities will not be double-counted, so it will not be double-scored.

Choices
School Activities
Community Activities
Community Service/Volunteerism
Faith
Responsibilities at Home
Work
None of these apply to me

School Activities

School activities include sports, clubs, and the arts -- things done at or through school, for example, Student Council, National Honor Society, Sports, Band, etc.

Name of Activity/Club/Sport - Please write the full name of the activity/club/sport. Do NOT abbreviate, so that the scholarship review committees can best understand the activity you are referencing.
Years Participated - This includes participation from Freshman through Junior year. Select the number of years you have participated (1-3).
Description - What did you do during your time participating in this activity/club/sport?
Leadership Role - List any titles/positions/leadership roles held in this activity. Examples include President, Treasurer, Co-Chair, Captain, etc.
Impact/Recognition - Including your impact/recognition at school, in the community, and/or beyond school and community.

School Activities

Name of Activity/Club/Sport	Years Participated	Description	Leadership Role	Impact/Recognition

Community Activities

Community Activities

Community activities are organized programs or groups you participate in outside of school, such as, 4-H, Boys/Girl Scouts, Indianapolis Children's Choir, community theater, club sports, etc.

Community Activity - Please write the full name of the activity. Do NOT abbreviate, so that the scholarship review committees can best understand the activity you are referencing.
Number of Hours & Weeks Participated - Estimate the average number of hours you spend on Community Activities each week and the number of weeks participated each year during your time in High School.
Number of Years Participated - This includes participation from Freshman through Junior year. Select the number of years you have participated (1-3).
Activity Description - Including Leadership & Impact - What did you do during your time participating in this activity? List any titles/positions/leadership roles held in this activity. Examples include President, Treasurer, Co-Chair, Captain, etc. Include your impact/recognition at school, in your community, and/or beyond school and community.

Community Activity	Number of Hours Participated per Week	Number of Weeks Participated	Number of Years Participated (1-3)	Activity Description - Including

		per Year (0-52)		Leadership & Impact

Community Service/Volunteerism

Community Service/Volunteerism

This can be traditional community service or things like unpaid tutoring for a neighbor or mowing an elderly neighbor's grass for free.

Community Service/Volunteerism Activity - Please write the full name of the activity. Do NOT abbreviate, so that the scholarship review committees can best understand the activity you are referencing.
Number of Hours & Weeks Participated - Estimate the average number of hours you spend on Community Service/Volunteerism each week and the number of weeks participated each year during your time in High School.
Number of Years Participated - This includes participation from Freshman through Junior year. Select the number of years you have participated (1-3).
Activity Description - Including Leadership & Impact - What did you do during your time participating in this activity? List any titles/positions/leadership roles held in this activity. Examples include President, Treasurer, Co-Chair, Captain, etc. Include your impact/recognition at school, in your community, and/or beyond school and community.

Community Service/Volunteerism Activity	Number of Hours Participated per Week	Number of Weeks Participated per Year (0-52)	Number of Years Participated (1-3)	Activity Description - Including Leadership & Impact

Faith

Faith

This includes attending your faith's daily/weekly/monthly activities/expectations

Faith Activity - Please write the full name of the activity. Do NOT abbreviate, so that the scholarship review committees can best understand the activity you are referencing.
Number of Hours & Weeks Participated - Estimate the average number of hours you spend on Faith each week and the number of weeks participated each year during your time in High School.
Number of Years Participated - This includes participation from Freshman through Junior year. Select the number of years you have participated (1-3).
Activity Description - Including Leadership & Impact - What did you do during your time participating in this activity? List any titles/positions/leadership roles held in this activity. Examples include President, Treasurer, Co-Chair, Captain, etc. Include your impact/recognition at school, in your community, and/or beyond school and community.

Faith Activity	Number of Hours Participated per Week	Number of Weeks Participated per Year (0-52)	Number of Years Participated (1-3)	Activity Description - Including Leadership & Impact

Responsibilities at Home

Responsibilities at Home

This should not include regular or weekly chores, but may include things like caring for a sibling or relative while parents work in the evening.

Responsibilities at Home Activity - Please write the full name of the activity. Do NOT abbreviate, so that the scholarship review committees can best understand the activity you are referencing.
Number of Hours & Weeks Participated - Estimate the average number of hours you spend on Responsibilities at Home each week and the number of weeks participated each year during your time in High School.
Number of Years Participated - This includes participation from Freshman through Junior year. Select the number of years you have participated (1-3).
Activity Description - Including Leadership & Impact - What did you do during your time participating in this activity? List any titles/positions/leadership roles held in this activity. Examples include President, Treasurer, Co-Chair, Captain, etc. Include your impact/recognition at school, in your community, and/or beyond school and community.

Responsibilities at Home Activity	Number of Hours Participated per Week	Number of Weeks Participated per Year (0-52)	Number of Years Participated (1-3)	Activity Description - Including Leadership & Impact

Work

Work

This typically should be considered PAID work; however, you may include unpaid internships or unpaid work with a family member.

Work Experience - Please write the full name of the activity. Do NOT abbreviate, so that the

scholarship review committees can best understand the activity you are referencing.
Number of Hours & Weeks Participated - Estimate the average number of hours you spend on Work each week and the number of weeks participated each year during your time in High School.
Number of Years Participated - This includes participation from Freshman through Junior year. Select the number of years you have participated (1-3).
Activity Description - Including Leadership & Impact - What did you do during your time participating in this activity? List any titles/positions/leadership roles held in this activity. Examples include President, Treasurer, Co-Chair, Captain, etc. Include your impact/recognition at school, in your community, and/or beyond school and community.

Work Experience	Number of Hours Participated per Week	Number of Weeks Participated per Year (0-52)	Number of Years Participated (1-3)	Activity Description - Including Leadership & Impact

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 your:

- Past accomplishments
- Current activities
- Future goals
- Special circumstances

We receive nearly 500 applications, **what makes YOU unique**. Why should the committee

choose you?

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

Character Limit: 3000

References

The Community Foundation no longer requests Letters of Recommendation for any of its scholarships, including the Lilly Endowment Community Scholarship; however, we do request that students list two references. The Lilly Scholarship Committee will follow up with references for those students who reach the Top 10, the interview stage of the Lilly Endowment Community Scholarship Program.

Please note: It is appropriate for you to ask your references if you may list them as a reference in this application. It should be someone who knows you well, who is not an immediate family member or another high school student.

Reference 1 - First and Last Name*

Character Limit: 75

Reference 1 - One sentence statement on how you know the reference.*

Character Limit: 250

Reference 1 - Email*

Character Limit: 254

Reference 1 - Phone Number*

Character Limit: 12

Reference 2 - First and Last Name*

Character Limit: 75

Reference 2 - One sentence statement on how you know the reference.*

Character Limit: 250

Reference 2 - Email*

Character Limit: 254

Reference 2 - Phone Number*

Character Limit: 12

What's Missing

What's Missing?*

Is there anything else you would like the committee to know that is not reflected elsewhere in your application?

If this does not apply to you, please indicate so by entering N/A.

Character Limit: 1200

Certification

Family Member Certification*

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.

(Please note: You must select "Yes" to be considered for scholarships offered at the Community Foundation.)

Choices

I certify, Yes
No

Certification*

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.

(Please note: You must select "Yes" to be considered for scholarships offered at the Community Foundation.)

Choices

I certify, Yes
No

Authorization*

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.

(Please note: You must select "Yes" to be considered for scholarships offered at the Community Foundation.)

Choices
I authorize, Yes
No

Submission Confirmation

STOP!

Please read before you click submit:

- Just a reminder - this has been the universal application. Once you sign below and **click 'Submit'**, you will get a Confirmation Page with a list of scholarship opportunities for which you are eligible.
- Next you will **click "Continue".**
- If you do qualify for the Lilly Endowment Community Scholarship, **after you click "Continue"**, you can then **click to verify and submit the application**.
- Only the Lilly Endowment Community Scholarship has a supplemental section.
- You MUST click Submit at the bottom of the Lilly Endowment Community Scholarship supplemental page for the Lilly Endowment Community Scholarship application to be considered complete.
- If you click your dashboard and only see **"Hendricks County Community Foundation's Universal Application"** on your dashboard and no other related scholarships beneath it, you are not eligible for any scholarships at the **Hendricks County Community Foundation** at this time.
- *Please note: once you submit, you can no longer edit the application.*
- If you have questions, you can reach out to Skylar Hazlett at skylar@hendrickscountycf.org
- Also, please make sure to contact your guidance counselor, as your application will **NOT be considered complete** until your guidance counselor has completed the Guidance Counselor Verification section.

Thank you for your time and interest in applying to the Hendricks County Community Foundation's scholarships!

Lilly Endowment Community Scholarship 2027

Lilly Scholarship Certification*

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 2026-27 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 $100, 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.

(Please note: You must select "Yes" to be considered for the Lilly Endowment Community Scholarship.)

Choices

Yes
No

Interviews: The Community Foundation Lilly Scholarship Committee will hold interviews on **Wednesday, November 4, 2026**. If you are selected for an interview, you will be notified by **Thursday, October 8, 2026**.

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

Recipients of the Lilly Scholarship must decide where they will be attending college and notify the Community Foundation and Independent Colleges of Indiana of that decision by **May 1, 2027**.

Acknowledgement*

I have read and acknowledge the information above.

Choices

Yes
No

Guidance Counselor Verification

Guidance Counselor Email Address*

1. Enter the email address for your guidance counselor.
2. Click Compose Email.
3. Write an email to your guidance counselor. Please include "Community Foundation Universal Application" and the deadline to submit the academic verification, (3:00 PM August 26, 2026). Below is a sample email if you would like to copy, paste, and update with your information.

SAMPLE EMAIL FOR YOUR USE:

Subject: Request for Academic Information for Hendricks County Community Foundation

Dear [ADD GUIDANCE COUNSELOR'S NAME],

I am applying for a scholarship from the Hendricks County Community Foundation and would appreciate you completing the academics section of the application on my behalf. You should receive a separate email titled Hendricks County Community Foundation: Guidance Counselor Request, which will include a link to a form. Please complete the information by 3:00 PM August 26, 2026.

Thank you for your assistance and support.

Sincerely,
[ADD YOUR NAME]

4. Click Send.
5. In addition to your email, the system will automatically send your Counselor a second email that contains their link to log on and complete the form.

Please note: After you click submit at the end of this application, your application will show up as incomplete in your dashboard until your guidance counselor has completed the verification section.

Character Limit: 254

Unweighted GPA*

Enter the Unweighted GPA to 2 decimal places.

Character Limit: 20

Weighted GPA*

Enter the Weighted GPA to 2 decimal places.

Character Limit: 20

At this point, which of the past diploma(s) is the student on track to receive?*

Select all that apply.

If the student is receiving one of the New IN Diploma or Honors Seal or Honors Plus Seal, and not one of the past diploma(s), then select "None of the Above" on this question.

Choices

Core 40
Academic Honors
Technical Honors
None of the Above

At this point, which of the NEW IN diploma(s) is the student on track to receive?*

Select all that apply.

If the student is not receiving a New IN Diploma, Honors Seal, OR Honors Plus Seal, then select "None of the Above" for this question.

Choices

New IN Diploma
Enrollment Honors Seal
Enrollment Honors Plus Seal
Employment Honors Seal
Employment Honors Plus Seal
Enlistment & Service Honors Seal
Enlistment & Service Honors Plus Seal

None of the Above

Does the student have an IEP, ILP or 504 education plan?*

Choices

Yes
No