SUSAN HAY HEMMINGER SCHOLARSHIP FOUNDATION

PO Box 9242 Michigan City, IN 46361

INFORMATION SHEET

The Susan Hay Hemminger Scholarship Foundation is a tax-exempt, not-for-profit, private educational foundation that awards partial tuition scholarships to eligible applicants who are:

- · Legal residents of LaPorte County, Indiana; and
- Graduates of a high school district the includes LaPorte County in its boundaries; and
- Accepted/Enrolled in a two- or four-year undergraduate program at an accredited institution

The Foundation does not discriminate on the basis of age, sex, race, or ethnic/national origin. Awards are made for one year, but awardees may re-apply through the application process in succeeding years. All applicants must agree to repay the tuition award if they fail to use it for allowable purposes, or if they fail to finish the academic year due to events within their control.

There are four award criteria:

Financial need is exhibited by the financial resources of parents/guardians (and the applicant where relevant). Each application must contain a full statement of income, assets and liabilities.

Academic achievement is seen in the applicant's high school & college records (as relevant), including GPA and courses taken. Applicants must include official transcripts with the application.

Community service/leadership is documented by an applicant's record of <u>active</u> involvement in non-academic pursuits and local service projects. This criterion will be balanced against the applicant's need to work after school and/or to perform family-related duties (e.g., care-giving).

Ability & commitment is seen by the applicant's achievements in the face of life circumstances and available choices. Each applicant must write an essay of no more than 500 words that relates their life experiences to personal goals and justifies why they should receive an award.

For 2022, all complete applications must be postmarked by October 31st to be eligible for consideration. The Foundation will consider only complete applications, and no enclosures will be returned. You will be notified within 30 days whether or not you will be receiving the award.

Applications will not be reviewed unless all these items are fully complete & submitted on time:

- Application form with all financial information fully complete & signed by relevant parties
- Official copies of high school and college (as applicable) transcripts
- Essay (typed, 500 words or less) do not submit a generic college application essay
- Written evidence of acceptance/enrollment at an accredited post-secondary institution

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2022 SCHOLARSHIP APPLICATION

PERSONAL INFORMATION		
Name		
Home Street Address		
City	State	Zip
Telephone	Туре	
Email Address		
College Street Address (if applicable)		
City	State	Zip
Marital Status		
Number of Dependent Children		
Employer		Job Title
Employer Street Address		
City	State	Zip
Length of Time Employed	Employer T	Telephone
HIGH SCHOOL INFORMATION		
High School Attended		Graduation Date

Cumulative GPA

Using the space below, list the extra-curricular and service activities in which you have participated during high school. Information should include the following as applicable: activity name, school or organization name, length of participation, description of involvement, leadership positions held, honors or awards received.

COLLEGE INFORMATION

Name of College

City State Zip

Enrollment Status Cumulative G.P.A.

Intended Major Area(s) of Study

Expected Graduation Date Expected Type of Degree

Using the space below, list the extra-curricular and service activities in which you have participated during college. Information should include the following as applicable: activity name, school or organization name, length of participation, description of involvement, leadership positions held, honors or awards received.

ACADEMIC TRANSCRIPTS

YOU <u>MUST</u> ATTACH OFFICIAL COPIES OF HIGH SCHOOL & COLLEGE TRANSCRIPTS and official written evidence of acceptance or enrollment at the school you listed. <u>Failure to provide official copies of relevant documents will disqualify you from award consideration</u>.

REFERENCES

Please list the names, mailing addresses, telephone numbers, and e-mail addresses (if known) of two people who know you and are willing to discuss your accomplishments and goals with us. The Foundation will contact them if needed, so please obtain their permission to be listed here.

Name

Email Telephone

Street Address

City State Zip

Name

Email Telephone

Street Address

City State Zip

ESSAY

Attach an essay of 500 words or less (2 typed, double-spaced pages maximum) that relates your life experiences and achievements (positive and negative) to your career and life goals. <u>Please submit an essay that addresses these items, not a generic one prepared for a college application</u>.

PARENT/GUARDIAN INFORMAT	ΓΙΟΝ (if applica	ble)			
Father/Adult Guardian Name					
Street Address					
City	S	tate	Zip		
Telephone	Туре				
Employer		Job Title			
City	S	tate			
Mother/Adult Guardian Name					
Street Address					
City	S	tate	Zip		
Telephone	Туре				
Employer		Job Title			
City	S	tate			
APPLICANT'S SCHOOL YEAR E	BUDGET				
This section must be completed IN F complete budget of the sources and requests) must equal total uses. Estil	uses of funds for i	next year. Total sources (inclu	iding all scholarship		
Sources	U	Uses			
Amount to be Received from Parents/Guardians	-	Tuition & fees for the year			
Amount of Personal Savings to be Used	F	Room/Housing Expenses			
Amount Expected from Part-Time Work During School Year	- E	Board/Food Expenses			
Amount Expected from this Summer's Work	- E	Books/Supplies Expenses			
Other Sources (including other grants & loans requested) – attach detailed list if needed		Commuting Expenses (if you p	olan to		
Amount Requested from Hemminger Foundation	(Other Uses (attach a list)			
Total Sources (must equal Total Uses)		Total Uses (must equal Total Sources)			
I/We affirm this budget is my/our best estimate of sources and uses of funds for the school year.					
Signature of Applicant		Da	ate		
Signature of Parent/Guardian		D.	ate		

PARENT/GUARDIAN FINANCIAL STATEMENT (or APPLICANT, if self-supporting)

Please complete the following items. All information will be handled in the strictest confidence. We require it to make a fully-informed decision on financial assistance needed and the amount the Foundation can provide. Feel free to discuss any special circumstances in an attachment.

Monthly Housing Payment \$

If no payment, provide explanation below

Parent(s) Marital Status

Number of Family Members in Household

Number of Family Members in College (including applicant)

INCOME INFORMATION

For year

If you wish, you may attach a copy of your most recent federal tax return.

	Father/Adult Guardian	Mother/Adult Guardian
Salaries & Wages		
Interest & Dividend Income		
Net Income (loss) from Business, Farm, Rentals, Etc.		
Other Income (including pensions, capital gain/(loss)		
Total Income from all Sources		

ASSET & LIABILITY INFORMATION

Fair Market Value as of

Assets	Liabilities
Bank Accounts (checking & savings)	Installment Debt (including auto loans)
Home	Home Mortgage(s)
Automobile(s)	Debt on Other Real Estate or Businesses
Other Real Estate or Business	
Other Assets (personal property, etc.)	
Total Assets	Total Liabilities

I/We affirm that the above information is correct & complete to the best of my/our knowledge.					
Signature of Parent/Guardian		Date			
Signature of Parent/Guardian		Date			

PLEASE INCLUDE ALL ATTACHMENTS WITH THIS APPLICATION (including essay, official school transcripts, additional information, and written proof of college acceptance/enrollment.)

Please ensure you and your parent(s)/guardian(s) (as applicable) sign this application. Mail it to:

SUSAN HAY HEMMINGER SCHOLARSHIP FOUNDATION PO BOX 9242 MICHIGAN CITY, IN 46361

After filling out this form You may also e-mail it to me at eliothay2010@hotmail.com with attachments as pdf files. Feel free to contact me at this e-mail address to confirm I received an application you mailed to me.

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ABOUT SUSAN HAY HEMMINGER

Susan Hay Hemminger was born in Indianapolis in 1958. She grew up in Michigan City, and attended public schools there, graduating from Rogers High School in 1976. She earned a bachelor's degree from the University of Michigan in 1980 and a Juris Doctor degree from Valparaiso University in 1983. She was an attorney in private practice from 1983 to 1990.

Elected Judge of LaPorte Superior Court No. 4 in 1990, Susan Hay Hemminger was the first female judge in LaPorte County. She served in that capacity until her death in 1993 at age 34.

Committed to volunteer service to the local community, Susan Hay Hemminger was a founding member of the LaPorte Teen Court, president of the Michigan City chapter of Tri Kappa service sorority, a board member of both LaPorte Big Brothers/Big Sisters and LaPorte County Meals on Wheels, and served as a deacon in the First Presbyterian Church of Michigan City.

Created by Judge Hemminger shortly before her death, the Foundation makes tuition awards to legal residents of LaPorte County who graduated from a high school with LaPorte County in its boundaries, and who are pursuing a two- or four-year degree at an accredited institution.

Since 1995, the Foundation has awarded over \$1,000,000 to over 150 students from LaCrosse, LaLumiere, LaPorte, Marquette, Michigan City, New Prairie, South Central, and Westville high schools. Award winners mostly attend Indiana colleges, but all accredited colleges are eligible.