

Community Foundation of White County

WOMEN GIVING TOGETHER SCHOLARSHIP IN HONOR OF CONNIE NEININGER

(1001 Airport Rd.) P.O. Box 1154, Monticello, IN 47960

Phone (574) 583-6911

www.cfwhitecounty.org

Application instructions

The Women Giving Together Scholarship was created to honor Connie Neininger, the first Executive Director of the Community Foundation of White County. A pillar in the community, Connie helped not only with the creation of the Foundation but led community-wide efforts to build a giving circle for women to engage in philanthropy and address their hopes and dreams. This scholarship is a continuation of the mission of Women Giving Together.

This \$500 scholarship is to support a non-traditional female student pursuing higher education who resides in White County. Student must not be related to Connie Neininger. Payment for scholarship will be made directly to college/university upon receipt of official invoice copy.

CHECKLIST OF ATTACHMENTS:

Copy of official transcript of grades

Copy of letter of acceptance from a college/university

Personal insight essay (1-page)

Letter(s) of recommendation (1)

Please read and follow all instructions carefully. Incomplete applications will not be considered.

Applicant Information & Education Plans: *Fill out completely.*

Name (first, middle, last): _____

Permanent address (Street, City, State, Zip): _____

_____ Email address _____

Preferred telephone: _____ Date of Birth: _____ Are you a U.S. Citizen? _____

County of Residence: _____ Anticipated Major: _____

College/Technical school you plan to attend: _____

City _____ State _____ Have you been admitted? YES / NO

Check one: 4-year college/university 2-year community/junior college vocational/technical school

I certify that all information given in this application is true and understand that falsification of information will result in the termination of any scholarship granted. Dated this _____ day of _____, _____.

Signature: _____

Family Overview:

Number of family members living in household: _____

Number of college or technical students in your family next year (not including yourself): _____

Personal Involvement/Achievements (may attach one additional page, only if necessary; other additional pages will not be forwarded to selection committee):

School-sponsored/Extra-curricular activities (list offices held) _____

Honors/Awards _____

Community/Volunteer/Church activities _____

Work Experience:	Dates	Position	Employer	Hours per week
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____

Other scholarships you have received or expect to receive (if known at this time):

Name or Source of Scholarship _____ Amount \$ _____

Name or Source of Scholarship _____ Amount \$ _____

Other scholarships for which you have applied: _____

Academic Information:

High School: _____ Graduation Date: _____

Class Rank: _____ of _____ Cumulative GPA: _____ (on a scale of _____)

Higher Education (if any) _____

Years attended: _____ Major: _____

Degree achieved (if any) _____

Awards/Certificates: _____

Applications can be returned to the Community Foundation of White County's office or sent electronically:
PO Box 1154, Monticello, IN 47960
rachael@cfwhitecounty.org