

**Grand Guardian Council of Indiana
Educational Foundation, Inc.
Scholarship Program**

The purpose of the Educational Foundation is to receive, hold, and invest contributions, grants, gifts, and bequests and to grant educational scholarships to members of Job's Daughters within the jurisdiction of the Grand Guardian Council of Indiana. Subject to availability of funds, the Educational Foundation will award scholarships each year.

Eligibility and Qualifications

Active Job's Daughters and Majority Members of Indiana Bethels who:

1. Have applied for enrollment in a college, university, trade school, or community college part time or full time
2. Have a financial need and demonstrate leadership ability, community service, academic standing, and moral character
3. Have taken the SAT, ACT, or other entrance exam, if required for admission
4. Have submitted the completed application with all required attachments and certifications to Educational Foundation Board.
5. Have not received more than 4 scholarships from the Educational Foundation.

Administration and Procedures

Downloadable forms are located on the Indiana JDI website.

Forms Required:

1. Fully completed electronic or paper application
2. Official high school or official college transcript
3. Copy of current dues card or majority certificate or a completed membership certification form signed by Bethel Guardian Secretary or Grand Secretary.
4. Cover Letter – *please use the template provided*
5. Resume – *please use the template provided*

Deadline – emailed or postmarked on:

April 1, 2021

Email completed applications and transcripts to:

IndianaEducationFoundation@gmail.com

Mail completed applications and transcripts to:

Leslie Marlatt, 801 State Road 13 N, North Manchester, IN 46962

**ALL SCHOLARSHIP FORMS MUST BE EMAILED OR POSTMARKED
ON APRIL 1, 2021**

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Section 1: Personal Information

Full Name: _____

Home Address: _____

City: _____ State _____ Zip Code _____

Place of Birth: _____ Birth Date: ____ / ____ / ____

Phone Number: (____) _____ Majority Date: ____ / ____ / ____

Bethel Number: _____ Bethel Location: _____

Have you previously been awarded a scholarship from the Educational Foundation? _____

Section 2: School Information

Applicants who have NEVER attended college, trade school, etc.

High School: _____

Location: _____ Graduation Date: ____ / ____ / ____

GPA: _____ on a _____ scale Class Rank: _____ out of _____ students

SAT: *Critical Reading* _____ *Math* _____ *Writing* _____ ACT Composite: _____

All applicants

Name of Institution: _____

Location: _____ Have you been accepted? _____

If you have not been accepted, please explain: _____

Major: _____

Minor: _____ Credit Hours/Semester: _____

Graduation Year: _____ College GPA: _____

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Section 3: Work Experience

Job Title: _____ Employer: _____

Dates Employed: _____ Hours/Week: _____

Job Duties: _____

Job Title: _____ Employer: _____

Dates Employed: _____ Hours/Week: _____

Job Duties: _____

Job Title: _____ Employer: _____

Dates Employed: _____ Hours/Week: _____

Job Duties: _____

Section 4: Family Financial Information

Please note: All financial information is strictly confidential and will be used only by the Foundation to assess a Daughter's need and will NOT be communicated to any other person or entity. Following the completion of the evaluation process, all forms will be destroyed.

Father/Guardian Information

Name: _____

Home Address: _____

City: _____ State _____ Zip Code _____

Phone Number: (_____) Occupation: _____

Mother/Guardian Information

Name: _____

Home Address: _____

City: _____ State _____ Zip Code _____

Phone Number: (_____) Occupation: _____

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Annual Family Income: \$ _____

How many other persons in your family are dependent upon parents/guardians for support? _____

What are the ages of those dependents? _____

How many household members are currently enrolled in college? _____

Independent Students – Please complete if you are legally financially independent

Marital Status _____

Spouse's Name _____ Spouse's Occupation _____

How many dependents do you have? _____ Relationship: _____

University Costs

Tuition \$ _____

Room and Board \$ _____

Technology, Activity, Other Fees \$ _____

Books and Supplies \$ _____

Personal Expenses/Transportation \$ _____

Total Annual Cost \$ _____

How do you plan to pay for your expenses? Check all that apply.

- | | | |
|--|---|---|
| <input type="checkbox"/> Parents/Guardians | <input type="checkbox"/> Student/Government Loans | <input type="checkbox"/> Outside Scholarships |
| <input type="checkbox"/> Personal Wages | <input type="checkbox"/> Work Study | <input type="checkbox"/> _____ |

Are you a 21st Century Scholar? ☐ Yes ☐ No

Please list what scholarships you have applied for and indicate which you have received.

_____	<input type="checkbox"/> R <input type="checkbox"/> D <input type="checkbox"/> P
_____	<input type="checkbox"/> R <input type="checkbox"/> D <input type="checkbox"/> P
_____	<input type="checkbox"/> R <input type="checkbox"/> D <input type="checkbox"/> P
_____	<input type="checkbox"/> R <input type="checkbox"/> D <input type="checkbox"/> P
_____	<input type="checkbox"/> R <input type="checkbox"/> D <input type="checkbox"/> P
_____	<input type="checkbox"/> R <input type="checkbox"/> D <input type="checkbox"/> P
_____	<input type="checkbox"/> R <input type="checkbox"/> D <input type="checkbox"/> P

R = received; D = denied; P = pending

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Educational Foundation Scholarship Checklist

*All items below must be submitted to the Educational Foundation electronically or postmarked
by **April 1, 2021** in order to be considered for a scholarship.*

Item	Submitted
Completed online or paper application	
Official high school or college transcript *this must be mailed to Foundation*	
Copy of Dues Card, Majority Certificate, or Membership Certification form	
Cover Letter	
Resume	

I verify that the information on this application is accurate. If an award is made to me and I am unable to attend school as specified in this application for the specified academic school year, I agree to return the award to the Educational Foundation.

Signature of Applicant

Date Signed

I agree that the information on this application is accurate and that the funds will be returned to the Educational Foundation if my dependent child is unable to attend school as specified in this application for the specified academic school year.

Signature of Parent/Guardian

Date Signed

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Utilize this form only if you DO NOT have your current Dues Card or Majority Certificate.

Applicants should complete the top portion of this form and then send it to the Bethel Guardian for the Bethel Guardian Secretary to complete it. If you are a Majority Member and your Bethel is closed, please send this form to the Grand Secretary to complete.

Full Name: _____

Home Address: _____

City: _____ State _____ Zip Code _____

Phone Number: (__) _____ Majority Date: ____ / ____ / ____

Bethel Number: _____ Bethel Location: _____

To be completed by the Bethel Guardian Secretary or Grand Secretary

I certify that the above named applicant is:

☐ Active Member

☐ Majority Member

Bethel _____ of _____ , Indiana

Printed Name

Title

Signature

Date Signed

Bethel or GGC
Seal Here

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Sample Cover Letter for the Educational Foundation Scholarship

Your Name
Address
City, State, Zip Code
Date

Educational Foundation
Address
City, State, Zip Code

Dear Educational Foundation:

Paragraph 1: Describe what Job's Daughters activities, high school/college activities, work experience, and community service you have done. Tell the committee what you have learned from participating in these activities and what skills you have gained.

Paragraph 2: Write about your plans after graduation: where you plan to go to school, what you would like to major in, and what type of future career you would like to have

Paragraph 3: Detail why you think you should receive this scholarship and how this scholarship will help you achieve your goals.

Paragraph 4: Express your gratitude to the committee for considering your application and provide information on how they can contact you if they have any questions.

Sincerely,

(Your handwritten signature)

Your full name typed

Enclosure: Application, Cover Letter, Resume, Official Transcript, and Membership Certification

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Carolyn Bailey

4215 Ethel T. Wead Mick Drive, Uz, IN 45698
carolynbbailey@gmail.com | (123) 456-7890

EDUCATION

Academic Honors Diploma
Jemima High School

Anticipated June 2021
Uz, IN

- GPA: 3.8/4.0

JOB'S DAUGHTERS INVOLVEMENT

HIKE Coordinator
Indiana Job's Daughters

August 2019 – August 2020
State of Indiana

- Raised \$10,000 for Hearing Impaired Kids Endowment Fund
- Created awareness within the community

Honored Queen
Bethel 1

January 2019 – June 2019
Uz, IN

- Presided over 12 Bethel meetings
- Planned 2 Bethel fundraisers, 3 Bethel outings, and 2 service projects during the term
 - *Other stations held: Inner Guard, Librarian, 1st Messenger, 2nd Messenger, 3rd Messenger, 4th Messenger, 5th Messenger, Chaplain, Marshal, Guide, Junior Princess, Senior Princess*

HIGH SCHOOL ACTIVITIES

Student Athletic Section Member
Jemima High School

August 2019 – Present
Uz, IN

- Attend over 20 sporting events each semester and encourage team
- Organize theme nights and communicate information to students

Frenchy in musical Grease
Jemima High School

February 2019 – May 2019
Uz, IN

- Memorized all musical lines and songs
- Helped market performance and sell tickets

Girls' Swim Team Captain and Member
Jemima High School

October 2018 – Present
Uz, IN

- Lead team through stretching and warm up exercises
- Served as a role model for team members

WORK EXPERIENCE

Cashier
Dairy Queen

June 2020 – Present
Uz, IN

- Provide outstanding customer service to patrons
- Deliver food quickly and accurately

COMMUNITY SERVICE

- Habitat for Humanity House Build June 2019
- Uz United Methodist Church Mission Trip August 2018

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