



CONFIDENTIAL

## *Caroline Scott Harrison Chapter*

*Daughters of American Revolution*  
4635 North Illinois Street, Indianapolis, IN 46208

### **CSH VICE PRESIDENT'S SCHOLARSHIP APPLICATION**

**The amount of the award varies and is disbursed in June, July, or August.**

Applications must be postmarked by **March 15th**. All awards are placed on deposit with the college or university; any unused portion shall be returned to the Caroline Scott Harrison Chapter, National Society Daughters of the American Revolution.

#### **ELIGIBILITY:**

**Applicants must be entering their Sophomore, Junior, or Senior year in the fall of 2026. Attend a four-year undergraduate accredited college or university in Indiana.**

**Have a minimum grade point average of 2.0 on a 4.0 scale.**

**Be a U.S. citizen and a permanent resident of Boone, Hamilton, Hancock, Hendricks, Johnson Marion, Morgan, or Shelby County.**

Please Type or Print

**Name:**

\_\_\_\_\_

(Last)

(First)

(Middle)

**Mailing Address:**

\_\_\_\_\_

(Street)

(City)

(Zip)

**Parents' Address:**

\_\_\_\_\_

(Street)

(City)

(Zip)

\_\_\_\_\_

(Area code)

(Telephone Number)

**Email Address:** \_\_\_\_\_

**Marital Status:** (Circle One) Single Married

**Spouse's Name (if applicable):** \_\_\_\_\_

**Occupation:** \_\_\_\_\_

**Children:** (Circle One) Yes No **Ages of Children** \_\_\_\_\_

**Resident of Marion County:** (Circle One) Yes No

**If No:** (Circle One) Boone Hamilton Hancock Hendricks Johnson Morgan Shelby

**Applicant's Occupation:** \_\_\_\_\_

**Are you financially dependent on your parents?** (Circle One) Yes No

**Father's Occupation:** \_\_\_\_\_

**Mother's Occupation:** \_\_\_\_\_

**Fall Semester:** (Circle One) Sophomore Junior Senior

**(Attach additional pages if needed for the following.)**

**SPECIAL ACHIEVEMENTS:** (List honors classes, offices, honors, awards, and scholarships received.)

**LEADERSHIP ACTIVITIES:** (List both school and community-related activities and level of participation)

**EMPLOYMENT:** (List part-time, full-time, or summer jobs and dates.)

**FINANCIAL DATA:** To enable the Caroline Scott Harrison Scholarship Committee to select the scholarship recipient, it is necessary to evaluate financial need as well as scholastic achievement. For this reason, you are asked to provide the following information:

**Total College Expenses This Year:** \_\_\_\_\_ **Next Year:** \_\_\_\_\_

**Tuition and Mandatory Fees:** \_\_\_\_\_ **Books:** \_\_\_\_\_ **Room & Board:** \_\_\_\_\_

If you anticipate larger expenses next year, please explain: \_\_\_\_\_

How much can you provide of your own income? \_\_\_\_\_

How much can your parents or spouse provide? \_\_\_\_\_

Are other scholarships available to you? \_\_\_\_\_ If so, what amount? \_\_\_\_\_

Are these scholarships renewable? \_\_\_\_\_ If so, what amount? \_\_\_\_\_

**REFERENCES:**

Please list 3 references (not relatives), one of whom is a professor or counselor in the school you are attending. The Committee may or may not contact them. Letters of recommendation are not required but are helpful during the selection process.

Name	Occupation/Location	Address & ZIP Code	Telephone Number
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**IMPORTANT – PLEASE ATTACH A CURRENT OFFICIAL ACADEMIC TRANSCRIPT.**

A double-spaced typewritten essay of approximately 1,500-2,000 words must be written and submitted by applicant (please attach). **The topic and instructions are listed in a separate file titled, ESSAY CONTEST.**

**PLEASE NOTE: If you are applying for BOTH chapter scholarships, the essays may not be the same. You MAY NOT submit an essay from a previous year.**

## **Agreement and Understanding**

I hereby authorize the Caroline Scott Harrison Chapter, National Society Daughters of the American Revolution (NSDAR), to publish my name as a recipient of a Caroline Scott Harrison Chapter Vice President's award/scholarship. This publication may be in official Caroline Scott Harrison Chapter (CSH) publications, in official communications, various other writings about CSH and by electronic [e.g., website or internet] means. In addition, my name may be published by CSH in a public forum.

*Please Print*

Full Name: \_\_\_\_\_

Telephone number with area code: \_\_\_\_\_

Email: \_\_\_\_\_

Signature: \_\_\_\_\_

**DEADLINE: Must be postmarked by March 15th.**

Only those who receive scholarships will be notified by mail or e-mail. To be notified when the application is received by the scholarship chairman, include a self-addressed stamped envelope or postcard.

Applications should be sent to the Caroline Scott Harrison Chapter, NSDAR at the address listed below. Please be sure to send everything in **one envelope**:

- 1) Application**
- 2) Official Transcript in a sealed envelope**
- 3) Essay**
- 4) Letters of Recommendation (optional)**

Scholarship Chair  
c/o Caroline Scott Harrison Chapter, NSDAR  
4635 North Illinois Street  
Indianapolis, IN 46208-3500