



## The Patrick Lindsey Memorial Scholarship

A \$500 college scholarship awarded to a minority student interested in pursuing an education in Visual and Performing Arts.

The Patrick Lindsey Memorial Scholarship is named for an extremely talented and generous artist. This scholarship was created not only to honor Patrick, but to aid graduating minority high school seniors in Lake County, Indiana interested in the Fine Arts. Patrick was born in 1971 and began his music career at age 8. With only one year of formal training, he was a 'natural' on the piano and organ. His love of music and the arts was apparent as he performed for and with various churches, choirs, and organizations throughout Northwest Indiana. In 1990, Patrick founded the East Hammond Community Choir.

The Lindsey family developed the Patrick Lindsey Memorial Scholarship as a way of showing their love and support for Patrick. Through helping others interested in furthering their education in music, dance, drama or art...his legacy lives on.

# **PATRICK LINDSEY MEMORIAL SCHOLARSHIP**

## **ADMINISTERED BY LEGACY FOUNDATION**

### **Scholarship Guidelines**

1. One or more scholarships will be awarded annually to a graduating minority senior from a Lake County Indiana High School pursuing an undergraduate degree in visual or performing arts.
2. The scholarship amount is \$500.
3. This scholarship is designated for tuition, fees and/or book expenses.
4. Scholarship checks will be issued directly to the student's college or university. Proof of enrollment (a copy of the tuition bill) must be provided to the Legacy Foundation before a check will be issued. If the student wishes the funds to be used for book expenses, the student must notify Legacy Foundation at the beginning of the school year. Copies of the receipts must be furnished to the Legacy Foundation along with a form that will be sent to the student.

### **Scholarship Eligibility**

1. The scholarship will be awarded to a minority student who has a cumulative GPA of 2.5 or better (on a 4.0 scale).
2. A graduating high school senior or student must be enrolled in a program of study leading to an associate or bachelor degree at an accredited college or university. The student must be enrolled on a full-time basis.
3. The course of study must be in visual art, theater, music, or dance.
4. Students will be selected based upon their cumulative GPA, high school and community activities, essay, and arts information provided.

### **Application availability**

The application is available in the Guidance office, from Legacy Foundation, and on the Legacy Foundation website at [www.legacyfoundationlakeco.org/scholarships](http://www.legacyfoundationlakeco.org/scholarships).

Your completed application must include:

- The completed application form typed or printed neatly in black or blue ink *or* completed online.
- 2 letters of recommendation. One from a teacher or counselor from your school, and a second from a non-related person who can attest to your character and extra-curricular activities.
- An essay (not to exceed 300 words)
- Your official high school transcript (to be supplied by the guidance counselor and must show at least 1 senior grading period.)

### **Application Deadline is April 15<sup>th</sup> annually**

The completed application must be postmarked by April 15<sup>th</sup> and returned to:

Legacy Foundation  
1000 E. 80<sup>th</sup> Place, Suite 402 North  
Merrillville, IN 46410

Questions can be answered by calling 219-736-1880 or email: [legacy@legacyfdn.org](mailto:legacy@legacyfdn.org)

# PATRICK LINDSEY MEMORIAL SCHOLARSHIP

## ADMINISTERED BY LEGACY FOUNDATION

**INSTRUCTIONS FOR COMPLETING THIS APPLICATION:**

1. Please type or print all information using blue or black ink. This application is also available online at [www.legacyfoundationlakeco.org/scholarships](http://www.legacyfoundationlakeco.org/scholarships).
2. Complete all questions; additional information may be provided on a separate sheet.

**PERSONAL INFORMATION (FOR REFERENCE ONLY)**

Name \_\_\_\_\_  
(Last) First (M.I.)

Address \_\_\_\_\_  
(Street) (City) (Zip Code)

Phone Number \_\_\_\_\_ email \_\_\_\_\_

Parent(s)/Guardian Name \_\_\_\_\_

Parent(s)/Guardian Address/Phone (if different than above) \_\_\_\_\_

**ACADEMIC INFORMATION**

High School \_\_\_\_\_ City \_\_\_\_\_

List the colleges or universities where you have applied and the status of the application:

| <b>College applied to:</b> | <b>Status of application:</b>                                      |
|----------------------------|--|
|                            | <input type="checkbox"/> pending <input type="checkbox"/> accepted |
|                            | <input type="checkbox"/> pending <input type="checkbox"/> accepted |
|                            | <input type="checkbox"/> pending <input type="checkbox"/> accepted |
|                            | <input type="checkbox"/> pending <input type="checkbox"/> accepted |

Degree/Course of study (e.g.: visual art, theater, music, dance, etc.) \_\_\_\_\_

List work experience, if any:

| <b>Place of Employment</b> | <b>Dates of Employment</b> | <b>Job Duties</b> | <b>Name of Supervisor</b> |
|----------------------------|----------------------------|-------------------|---------------------------|
|                            |                            |                   |                           |
|                            |                            |                   |                           |
|                            |                            |                   |                           |
|                            |                            |                   |                           |

Last Name \_\_\_\_\_

List extra-curricular activities in which you have participated during high school. Include any honors or special recognition that you have received.

| <b>Activity</b> | <b>Year(s) of Participation (9-12)</b> | <b>Positions of Leadership (if any)</b> | <b>Honors / Special Recognition Received</b> |
|-----------------|--|---|--|
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List community activities in which you have participated in the last four years. Include any honors or special recognition that you have received.

| <b>Activity</b> | <b>Year(s) of Participation (9-12)</b> | <b>Positions of Leadership (if any)</b> | <b>Honors / Special Recognition Received</b> |
|-----------------|--|---|--|
|                 |  |   |  |
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**ARTS INFORMATION:** (If space is insufficient, please feel free to attach up to two (2) additional pages of information.)

| <b>Arts Activity in or out of school</b> | <b>Year(s) of Participation (9-12)</b> | <b>Honors/Awards/ Special Recognition Received</b> |
|--|--|--|
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What is your motivation to pursue advanced education/training in the arts and what do you want to do with this education in the future?

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Last Name \_\_\_\_\_

Why do you feel the study and practice of your art form is important?

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What makes you uniquely qualified to receive the Patrick Lindsey Scholarship Award?

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**REFERENCES**

Submit two (2) letters of recommendation, one from a teacher or counselor from your school, and a second from a non-related person who can attest to your character and extra-curricular activities.

**ESSAY**

Write an essay on the following topic: As a recipient of this scholarship, how do you envision this award in assisting you to achieve your career goals? (not to exceed 300 typed words)

**CERTIFICATION**

The Legacy Foundation, Inc., *Lake County's Community Foundation*, is the administrator of this scholarship. By completing and signing this form, the applicant agrees to the following:

1. I hereby affirm that the information provided on this application is accurate and complete to the best of my knowledge.
2. I have read and understand the information provided on the Scholarship Guidelines page and have had my questions answered satisfactorily by the Legacy Foundation.
3. I hereby agree to send the Legacy Foundation an official transcript at the end of my Freshman academic year.
4. I hereby agree to submit a copy of my tuition bill at the beginning of my Freshman year and to notify the Legacy Foundation of any change in my enrollment status.
5. I hereby agree to return to the Legacy Foundation any unused portion of the scholarship which is refunded by the college or university in the event I cease to be enrolled at any time during the academic year.
6. The Legacy Foundation has my permission to use any general, non-financial information included in this application, as well as a photo, for publicity purposes.

Please sign and date this application:

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

**Submit the COMPLETED application and additional components and postmark on or before April 16<sup>th</sup>. Send to:**

Legacy Foundation  
1000 E. 80<sup>th</sup> Place, Suite 402 North  
Merrillville, IN 46410

Please direct all questions to the Legacy Foundation at 219/736-1880,  
or email [legacy@legacyfdn.org](mailto:legacy@legacyfdn.org)