#### 2026



Traditional Student's Application for Music and/or Education Majors
Adams County Community Foundation and the
Tiffany Abner Memorial Scholarship Fund
for Adams County / Jay County students
Scholarship Application





This application is for traditional, on-track, nontraditional students applying for scholarships through the Adams County Community Foundation (ACCF) for academic goals to major in music or education.

This scholarship opportunity is offered through the Adams County Community Foundation / Tiffany Grace Abner Fund in memory of a young woman who was very active with the Redeemer Lutheran Church in Bryant, IN and the Adams and Jay County communities. Musically, Tiffany was an avid violinist. She enrolled in the MusicWorks program to expand her skills by studying cello. This fund will be an annual tribute to remember Tiffany, her talents, and her love of music.

The ACCF Scholarships will be awarded through an application process designed to recognize deserving May / June 2026 graduates. Pages must be submitted in this order:

Check-off: Pages:

5	scholarship Application may be delivered or <mark>emailed</mark> to the Adams County Community Foundation at: <u>accf@AdamsCountyFoundation.org</u>	. This application is
	due by Wednesday, January 21, 2026, 4:00pm (EST) Questions? Please contact the ACCF at 102 N. 2nd Street, Decatur / (260) 72 accf@AdamsCountyFoundation.org.	4-3939 or email:
	Scholarship application ( <u>numbered</u> pages 1-2) Note: pg. 2, student and parent signatures required	1-2*
	Student, Guardian's/Parent's personal employment information ( <u>numbered</u> page 3)	3
	Additional page(s) as allowed (see application), all additional info may be submitted on one page (if needed, place here)	?
	Student's high school transcript (this may be one or two pages, printed one sided)	4,5
	Student's letter of recommendation (from a non-relative) — this does not need to be a seal letter	5,6
	(one letter from a student's high school administrator, teacher, student's supervisor, or family friend — must be non-relative)	

Do: Complete the application either by (preferred) computer (12 font) or neatly written.

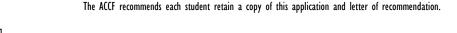
Note the order in which the pages should be stapled or submitted (see above)

Do: Attach your picture to the application (pg. 1).

**Do/Mailed** (for mailed copies) re: your picture, please have your name on the back of the photo. **Do/Mailed:** (for mailed copies) Print one sided. Staple your applications in the upper left corner.

Do/Mailed: (for mailed copies) Submit your approximate 6-page application in one envelope with appropriate postage

Do not: Miss The Deadline!! By 4:00 PM, Wednesday, January 21, 2026 at the Adams County Community Foundation, 102 N. Second Street, Decatur, IN 46733.





Questions? Comments? The staff at the Adams County Community Foundation (ACCF) welcomes your call:

(260) 724-3939 or email message: <a href="mailto:accf@AdamsCountyFoundation.org">accf@AdamsCountyFoundation.org</a>
Hours: M-Th 8-4, & F 8-1, / Please visit the ACCF website: <a href="www.AdamsCountyFoundation.org">www.AdamsCountyFoundation.org</a>
If you want to drop this off before or after hours, please use the mail slot on the ACCF, Madison Street door.

ACCF, 102 N. 2<sup>nd</sup> Street, Decatur, IN 46733

## The Adams County Community Foundation, Inc.

## Tiffany Abner Memorial Scholarship

Planned major: Music or Education

#### Program Eligibilities:

Type or print

- Must be a resident of Adams County or lay County Indiana School. Eligible: T, OT, or NT student.
- Must have demonstrated an interest in a particular musical area; and
- 3) Priority given (but not limited to): a GPA average 2.0 (on 4.0 scale), and
- 4) Must plan to enter an accredited postsecondary accredited college this fall.

### Include with this application (listed as supplemental):

- Student's most recent transcript
- 2) One letter of recommendation (from non-relative)

T / Traditional: This student is a graduating high school senior planning to attend college

Please attach your picture in this box.

OT /OnTrack: This student has been out of high school 1-5 years and is either a current college student or plans to attend in the fall.

NT / NonTraditional: This student has been out of high school 5+ years and/or has a child. This student is either a current college student or plans to attend in the fall.

Please return this completed three-page application (plus supplemental required materials) to the Adams County Community Foundation (ACCF), 102 N. Second St. Decatur, IN 46733 or electronically submit this application to: accf@AdamsCountyFoundation.org by 4:00 pm, Wednesday, January 21, 2026. Faxed copies are not accepted. Post marks on mailed copies (to designate date submitted) will not be accepted. Copies dropped off at the ACCF before or after hours may use the mail-slot on the ACCF, Madison St. door. Applications that do not meet this due date and time will not be considered.

Last Name	First Name	First Name		Home Telepho	ne	
Permanent Street Address	s City, State, Zip		Email			
Name(s) of Parent(s) or Legal Guardian(s)		Address (if	different from abov	re)		
Name of High School	Street Address	City,	City, State ZIP		Telephone	
fear graduated from h.s. Particular area of inter		rest or major:		GPA (4	GPA (4.0 scale)	
List Below Musical Programs in which you have participated:		City, State, ZIP		Year began / year concluded		
Major Pursuit:		1				1
Projected Graduation Date from college (M	lonth/Year):					
School / Personal Activities, Awards and H	onors: Beginning with the current	year, list all activities,	awards and/o	r honors received d	uring the	last four years.

ACCF Vocational Student Scholarship - continued
Tell us about the music instruction or experience and why it is important to your education:
If necessary, you may add a page to complete this information.
In a short paragraph, describe your decision to pursue your degree in the area of music or education and your future plans.
If necessary, you may add a page to complete this information.
Is there anything you would like the committee to know about you and / or your family? Please explain.
, , , , , , ,
If necessary, you may add a page to complete this information.
I will that the information would be this confined to fall account to the MCCD in complete two and complete for bounding fallification of
I certify that the information provided on this application (and all necessary paperwork to the ACCF) is <u>complete</u> , <u>true</u> , and <u>accurate</u> to the best of my knowledge. Falsification of information may result in termination of any scholarship granted and/or <u>repayment</u> of any funding misappropriated to me as a result of later discovered impropriety or illegality.
I agree to account for and return any amount of the special allocation for required books and required equipment remaining at the end of each school year.
By checking this, I understand that I have given the Adams County Community Foundation permission to share my scholarship application with other committees so that I may earn
scholarship(s) beyond the Foundation's selection committees and/ or (upon request) members of the donor's family.
The Foundation shall reserve the right to withdraw the scholarship if the recipient should conduct himself/herself in such a manner that would result in and reflect an unfavorable image upon the Adams County Community
Foundation and any scholarship associated with the Foundation.
Signature of Student: The signature below affirms that all information provided in this application is true and complete to the best of my knowledge.
G o
Date
Signature of Parent or Guardian: The signature below affirms that all information provided in this application is true and complete to the best of my knowledge.
Date

You may submit this application with necessary materials personally or by mail. It is the responsibility of the student to confirm the application was received by the ACCF within the required due date and time.

# Student & Family Employment, etc. Information, Adams County Community Foundation

102 N. Second Street / Decatur, IN 46733 / Ph: (260) 724-3939 www.AdamsCountyFoundation.org / Questions? accf@AdamsCountyFoundation.org

Please submit this completed form (this page may be neatly hand written) with each copy of the ACCF application.

Applicant's name:						
Employment:		part-time (app	rox. # of hrs./\	vk:)full-time		
Title:	Email add	lress:				
Employment:		Day Phone: part-time (approx. # of hrs./wk:)f				
Title:	Email add	dress:		<del></del>		
Father's/guardian's name:						
	part-time (approx. # of hrs./wk:)full-time					
Title:	Email add	dress:				
Siblings: (living with you and t	hose supported by y	your household - 50	% or more o	f the time):		
Deleteral	N		Year in Presently			
<u>Relationship</u>	<u>Name</u>	Age	<u>school</u>	attending college?		
1.)				yes no		
2.)				yes no		
3.)				yes no		
4.)				yes no		
5.)				yes no		
The following information is necessary		al space, please attach se this information to dete				
	Please check all	that apply:				
Family / College Information:						
		e college experience. lege experience.	ly to attend col	lege.		
	ge experience: s college experience as college experience		•	college degree. a college degree.		
Public assistance received during the	e past 12 months (check	k all that apply):				
Temporary Assistance to	Families	Trustee's Assistance	Fo	od Stamps		
Supplemental Security In	ncome (SSI)	Free or Reduced Lunch	n Ot	her:		