FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
OMB Number: 3235-0287
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1 Name at		s)												
1. Name and Address of Reporting Person * BOCHNOWSKI FRANK J			2. Issuer Name and Ticker or Trading Symbol NORTHWEST INDIANA BANCORP [NWIB(OB)]					-	_X_ Direc	(Che				
846 CRA		(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 11/24/2003			(ear)							
(Street) VENICE, FL 34292			4. If Amendment, Date Original Filed(Month/Day/Year) 11/24/2003					-	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person					
(City	y)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or				Beneficially Owned						
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	f Code (Instr. 8)		4. Securities Acquire (A) or Disposed of (I (Instr. 3, 4 and 5)					Following	6. Ownership Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	V Ar	Amount (A) or (D)		Price				(I) (Instr. 4)	(msu. 4)
Common	n Stock		11/24/2003		S	3,	000 I	D \$	\$29.8	\$89,400)		D	
							irectly.		1 4 4	h P	-4!£ · ·	·	ar.c	1474 (0.00)
				Derivative Securit	ies Acquir	Person contain the form ed, Dispo	s who ned in t m displ	this for lays a o	m are currer eficiall	not requally valid	OMB conf	ormation spond unle trol numbe	ss	1474 (9-02)

Reporting Owners

B 41 0 W 4	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
BOCHNOWSKI FRANK J 846 CRANE VENICE, FL 34292	X				

Signatures

/s/ Frank J. Bochnowski	11/24/2003
**Signature of Reporting Person	Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.