



Verl and Dorothy Miller Native American Vocational Scholarship Application

Scholarship Purpose	For Native American/American Indian students.		
Eligibility Requirements	Planning to attend or attending an educational institution in Oregon. Planning to pursue or pursuing a trade or vocational study. Recipients may be attending school either full time or part time. Note: Graduate students are not eligible.		
Award Information	Award amount varies. Prior recipients must reapply to renew their scholarship. Automatic renewal is possible for up to four years as long as awarded student is meeting scholarship criteria.		
Due Date for Application Submission	March 1, 2022		
Student Name	Last Name	First Name	Middle Initial
Student Mailing Address			
Student Email Address			
Student Home Phone		Student Cell Phone	
Student Pronouns			

School Information

Name and City/State of High School Attended			
SAT Score (max. 800 per section) – If Applicable		ACT Score – If Applicable (max. 36)	
Critical Reading and Writing	Mathematics		
College, University, or Educational Program You Plan to Attend			
Mailing Address of Institution			
Intended Major			
Intended Profession or Career			
Student ID (at college), if known			
Year in College Next Year (freshman, sophomore, etc.)		Estimated Cost of Attendance Next Year (tuition, fees, books, housing, etc.)	

Activities Chart

Please list below the activities in which you have participated. Start with most recent activities and list in reverse chronological order. Add or delete rows as needed.

Type of Activity	Dates (From -To)	Time Spent		Responsibilities / Accomplishments
		Hours per Month or Week	Total Hours	
School/Family/Community Activities:				
(1)				
(2)				
(3)				
Volunteer Service:				
(1)				
(2)				
(3)				
Work for Pay:				
(1)				
(2)				
(3)				

Achievements and Honors List

Please detail below notable achievements, accomplishments, honors or awards related to academics or leadership. Start with most recent first and list in reverse chronological order. Add or delete rows as needed.

	Date	Achievement / Honor
(1)		
(2)		
(3)		

Financial Resources

Please submit a copy of your Student Aid Report from the FAFSA or ORSAA
OR complete the information in the table below.

For which calendar year is this summary?		
Family Assets	Total balance in cash, savings and checking:	\$
	Net worth (value minus debt) of investments, including real estate:	\$
	Total Assets:	\$
	Parent/Guardian(s):	\$

You may be eligible for other scholarships through the Office of Student Access and Completion.
See www.oregonstudentaid.gov for information.

Family Annual Gross Income	Student:	\$
	Student spouse (if married):	\$
	Total Income:	\$
Number of households supported by gross income:		
Number of dependents supported by gross income:		
Number of household members attending college this year:		
Did you complete the Free Application for Federal Student Aid (FAFSA) or the Oregon Student Aid Application (ORSAA)? If so, please answer the questions to the right.	What is your Expected Family Contribution (EFC)?	\$
	Are you eligible for a Pell Grant?	Yes
		No
	Are you eligible for an Oregon Opportunity Grant?	Yes
No		
You may use the space below to describe your family's financial situation if you wish, but please do not exceed the space provided.		

Personal Statements

Please write five short essays addressing the following topics. Identify your essays by number or begin each with the essay topic, so that we know which essay relates to each topic. The essays should be approximately 150 words each.
1. What are your specific educational plans and career goals and why? What inspires you to achieve them?
2. What have you done for your family or community that you care about the most and why?
3. Describe a personal accomplishment and the strengths and skills you used to achieve it.
4. Describe a significant change or experience that has occurred in your life. How did you respond and what did you learn about yourself?
5. How do you view your cultural heritage and its importance to you?

Demographic Information

Please check the boxes that apply.

Date of Birth		Gender	<input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Trans Female/Trans Woman <input type="checkbox"/> Trans Male/Trans Man <input type="checkbox"/> Non-binary/Genderqueer/Gender non-conforming
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			<input type="checkbox"/> Different Identity: _____ <input type="checkbox"/> Choose Not to Say
Race/Ethnicity	Choose more than one, if applicable. <input type="checkbox"/> White <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> American Indian or Alaska Native	<input type="checkbox"/> Black or African-American <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> Other: _____ <input type="checkbox"/> Choose Not to Say	
Family Education History	Highest education completed by Parent 1/Caregiver 1 <input type="checkbox"/> Elementary School <input type="checkbox"/> Middle School <input type="checkbox"/> High School <input type="checkbox"/> College or Beyond <input type="checkbox"/> Don't Know	Highest education completed by Parent 2/Caregiver 2 <input type="checkbox"/> Elementary School <input type="checkbox"/> Middle School <input type="checkbox"/> High School <input type="checkbox"/> College or Beyond <input type="checkbox"/> Don't Know	

Requirements for Submission

A complete application packet must include the following, please check the box to confirm you have included each piece.	
<input type="checkbox"/>	Complete Application Form
<input type="checkbox"/>	Personal Statements
<input type="checkbox"/>	High School Transcript(s)
<input type="checkbox"/>	Transcripts from ALL schools you have attended since high school (if applicable)
<input type="checkbox"/>	Certification of tribal enrollment, descendancy or American Indian ancestry is required. Applications will not be considered without it. Please include with this application packet is ONE of the following: (1) a copy of your tribal enrollment card OR (2) a Johnson O'Malley student eligibility form OR (3) a letter from your tribe stating blood quantum and/or enrollment number of parent or grandparent or other descendancy paperwork
By signing this form, I, the applicant, certify the accuracy of the information I have provided. Also, I authorize (1) OCF to share this information with scholarship staff, donors and selection committee members and (2) OCF or scholarship selection committee members to contact school officials for additional information, if needed.	
<input type="checkbox"/>	Publicity release: If selected to receive a scholarship, I give permission for a publicity release.

Please Mail or Email Application Packet to:
Harper Pulsipher Oregon Community Foundation 1221 SW Yamhill, Suite 100 Portland, OR 97205 503.227.6846 hpulsipher@oregoncf.org

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