

TRIBAL PROGRAM NEWS

Siletz Scholarship 2003-2004

This scholarship is for students enrolled in a program leading to a degree in a medical field. To apply for the Siletz Scholarship, please submit the following:

- 1) Documentation of acceptance at an accredited vocational training or higher education institution, two-year, four-year, or graduate school
- 2) 500-word essay addressing the annual theme: **Describe your major area of study and its importance to you and the tribe.**
- 3) One letter of recommendation

Essays will be judged on content, organization, and development of theme, and use of proper grammar, spelling, and punctuation.

Awards: \$500 (up to three awards per year). Scholarship may not be awarded unless a minimum of two applications are received.

Personal Information

Last name: _____ First name: _____ MI: _____
SSN: _____ Date of birth: _____ Tribal Roll No.: _____
Current mailing address: _____
City: _____ State: _____ ZIP: _____
Permanent mailing address: _____
City: _____ State: _____ ZIP: _____
Home phone: _____ Work phone: _____

Education History

High School: Public Other Graduation/GED date: _____
Higher Ed/AVT Program: AA AS BA BS Graduate
Graduation date: _____ Degree received: _____
College/University: _____ Major: _____

Present Degree Program (2003-2004 Academic Year)

Start date: _____ Major: _____
College/University: _____ Degree name: _____
Degree abbreviation: _____ Graduation date: _____

Photo: Please submit a photo of good quality for use in newsletters and other CTSI publications, preferably one in your school or work environment.
Note: Photo is optional and does not reflect on scholarship eligibility.

Certification

Scholarship funds are to be used for academic purposes only.

By accepting the scholarship, I agree to advertising and promotional use of my name, picture, and biographical information. I understand that:

I hereby certify that the information provided on this form is true, correct, and complete to the best of my knowledge. I consent to the release of this information to other agencies and persons as necessary to determine my eligibility, budget, and financial need.

Applicant's signature: _____ Date: _____

Note: Applications must be received in our office by 4:30 p.m. on June 27, 2003. Incomplete applications will not be considered. All correspondence will be mailed by certified mail to permanent address unless otherwise requested in writing.

If you have any questions, please call Bev at 1-800-922-1399, ext. 290, or 541-444-8290. Please send applications to Bev Youngman, Programs Manager, CTSI, P.O. Box 549, Siletz, OR 97380-0549.

Scholarships are awarded at the Nesika Illahee Pow-Wow, the second weekend in August.

CTSI-Pepsi Scholarship 2003-2004

To apply for the CTSI-Pepsi Scholarship, please submit the following:

- 1) Documentation of acceptance at an accredited vocational training or higher education institution, two-year, four-year, or graduate school
- 2) 1,000-word essay addressing the annual theme: **Tell us about the most inspirational person in your life.**
- 3) One letter of recommendation

Essays will be judged on content, organization, and theme development, and use of proper grammar, spelling, and punctuation.

Awards: \$1,000. Scholarship may not be awarded unless a minimum of two applications are received. **This scholarship is made possible through a generous donation by Pepsi, Inc.**

Personal Information

Last name: _____ First name: _____ MI: _____
SSN: _____ Date of birth: _____ Tribal Roll No.: _____
Current mailing address: _____
City: _____ State: _____ ZIP: _____
Permanent mailing address: _____
City: _____ State: _____ ZIP: _____
Home phone: _____ Work phone: _____

Education History

High School: Public Other Graduation/GED date: _____
Higher Ed/AVT Program: AA AS BA BS Graduate
Graduation date: _____ Degree received: _____
College/University: _____ Major: _____

Present Degree Program (2003-2004 Academic Year)

Start date: _____ Major: _____
College/University: _____ Degree name: _____
Degree abbreviation: _____ Graduation date: _____

Photo: Please submit a photo of good quality for use in newsletters and other CTSI publications, preferably one in your school or work environment.
Note: Photo is optional and does not reflect on scholarship eligibility.

Certification

Scholarship funds are to be used for academic purposes only.

By accepting the scholarship, I agree to advertising and promotional use of my name, picture, and biographical information. I understand that:

I hereby certify that the information provided on this form is true, correct, and complete to the best of my knowledge. I consent to the release of this information to other agencies and persons as necessary to determine my eligibility, budget, and financial need.

Applicant's signature: _____ Date: _____

Note: Applications must be received in our office by 4:30 p.m. on June 27, 2003. Incomplete applications will not be considered. All correspondence will be mailed by certified mail to permanent address unless otherwise requested in writing.

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