Sons and Daughters of Oregon Pioneers

* College Scholarship Program *

Rules:

- 1. Applicant must be a Member and in good standing with SDOP.
- 2. Entries are comprised three parts: 1} the info card below 2} transcript 3} application questions (on page 2)
- 3. All entries must be received by **December 15**, or delivered to the Chairperson by the same date.
- 4. Judges ruling will be final.
- 5. Winners will be presented at the Annual Banquet in February, but need not be present to win.
- 6. Must be entirely the work of applicant. A picture of applicant must accompany entry.
- 7. Any judge who has a family member applicant must abstain from voting in that category.

Criteria and awards:

Up to \$1,000 has been budgeted per calendar year to assist up to two members with tuition, books, and mandatory fees, as they pursue their first bachelor's degree.

To apply, members must complete the info card below and official SDOP Scholarship application form from the website and send it, along with a sealed official transcript from their most recent high school, college, or university, to the SDOP Scholarship Committee.

Please send submissions to:

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Must be received by December 15

dmalex289@msn.com Please submit essays as Word files or .txt, photos as .jpg (300dpi or better)

Any questions?

Please contact Dawn Alexander (541) 581-0378 or

dmalex289@msn.com

* SDOP College Scholarship Info Card *

Please attach this to your application for Name:	• -			
Address:				
E-mail address:	P	arent's name(s):	
School:	- 	 		Year:
Name of your pioneer ancestor:			Year arrived in OR	Territory:
Major:				
Skills and talents:				
Signature:				
Sealed official school transcript included	☐ Application questi	ons attached □		SONS AND

Sons and Daughters of Oregon Pioneers * College Scholarship Program *

The Sons and Daughters of Oregon Pioneers offer scholarships to its members to help them achieve their goal of earning their first bachelor's degree. Please complete all parts of the application form and send it, along with a sealed official transcript from your most recent high school, college, or university, to the address listed below. If you are a previous SDOP Scholarship recipient please also include a sealed official transcript from all colleges or universities you attended while receiving the scholarship.

Attn: Scholarship Committee PO Box 6685 Portland, Oregon 97228-6685

Please read the SDOP Scholarship Policy before you begin filling out the application form. If you are awarded a scholarship you will be required to provide a valid social security number for use in crediting the scholarship funds to your college or university account. A photograph of you may be requested and will be used for publicity purposes.

Applicant's Name:					
Home Address:					
Telephone Number:	-				
Email:	_				
Most Recent School:	Years Attended:				
What college or university do you plan to attend?					
Have you applied to this institution? Yes: No:	If no, by what date will you apply?				
Have you been accepted, or are you currently attending this institution? Yes: No:					
If yes, please attach your acceptance letter or proof of enrollment.					

Please answer the following five questions on a separate document (Word file or .txt). Please retype the question and then add your response. Your responses to these questions will be evaluated by the Scholarship Committee primarily for content, so organization, spelling, and grammar are important.

- 1. What are your educational goals?
- 2. What do you plan to do with your degree?
- 3. How do you plan to contribute to a positive future for Oregon or your home state?
- 4. How has your family history, as the descendent of a pioneer, made difference in your life and how do you plan to keep your personal history alive?
- 5. What other factors would you like the Scholarship Committee to consider? (Academic achievement, SAT/ACTs cores, letters of recommendation [no more than 2], volunteer work, work experience, the overcoming of a hardship, etc.) Please attach supporting documentation if it exists.

Please read and sign, indicating your acceptance of the following statement:

I have read, understand, and agree to the terms and conditions set forth in the SDOP Scholarship Policy: if selected as the recipient of an SDOP Scholarship, I will use the funds only in accordance with the SDOP Scholarship Policy. I certify that I have not completed the requirements to receive a bachelor's degree at any college or university. If any part of the scholarship will not be used in accordance with the SDOP Scholarship Policy I will notify SDOP as soon as I become aware of the fact. I understand that, at its sole discretion, SDOP will work with me to see that those funds are returned to SDOP. If I am awarded a scholarship, I agree to have my name and photograph used by the Sons and Daughters of Oregon Pioneers for publicity purposes.

Appl	icant's Signature:		Date:	
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