NativeVision Scholarship

Purpose
Established in 1996, NativeVision gives annual college scholarships to outstanding American Indian young people with a commitment to education, athletics and leadership.

Eligibility
Candidates must:

1. Be an enrolled member of a federally recognized tribe;
2. Demonstrate a sustained involvement in the community and an applied concern for American Indian issues and initiatives;
3. Maintain a grade point average (GPA) of at least 3.0 at the time of application;
4. Demonstrate involvement in extracurricular and/or athletic activities;
5. Be admitted to an accredited community college or four year undergraduate program (for fall 2013).

Application Checklist
Application for the NativeVision Scholarship must include the following items. Applications missing any of the following items will not be considered.

- □ Completed application describing school activities, community activities, athletic activities and financial information.
- □ Proof of membership in a federally recognized tribe.
- □ A 200 word essay explaining goals for the future and how the NativeVision scholarship would assist in achieving dreams. Please emphasize how goals relate to continued involvement in American Indian/Alaska Native communities.
- □ High school transcript indicating GPA.
- □ Two (2) completed recommendation forms including written statements from recommenders (recommendations cannot come from a family member).

Application Submission
Submit completed applications to:

Marlena Hammen
NativeVision Scholarship
Johns Hopkins Center for American Indian Health
621 N. Washington Street
Baltimore, Maryland 21205
Telephone: 410-955-6931
Fax: 410-955-2010

Applications must be received to Ms. Hammen by May 3, 2013 at 5pm (EDT)

APPLICANT INFORMATION

Name: _____

Permanent Address: _____

_____

Home Telephone: _____Work Telephone (Applicable):_____

Date of Birth: _____ Place of Birth: _____

Social Security Number: _____Sex: _____

Name of High School Attended: _____

Name and Address of Tribal Affiliation: _____

_____

Parents: _____

College or University attending (Name, City and State): _____

_____

Intended Major: _____

School Activities: _____

_____

_____

Community Activities:

_____

_____

Athletics Activities: _____

_____

_____

Essay: See topic above and present on separate sheet(s) of paper.

Parents or Guardian

Full Name: _____

Address: _____

_____

Telephone: _____

List Other Financial Assistance Applied for and/or receiving:

Source	Amount
_____	_____
_____	_____
_____	_____

I CERTIFY THAT THE INFORMATION PROVIDED IN THIS APPLICATION IS TRUE TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT FALSIFICATION ON INFORMATION ON THE APPLICATION RENDERS IT SUBJECT TO REJECTION AND INELIGIBILITY.

_____ _____

Student Signature Date

TO THE BEST OF MY KNOWLEDGE, THE ATTACHED ACADEMIC INFORMATION IS ACCURATE.

_____ _____

High School Counselor Signature Date

NativeVision Scholarship
Letter of Reference

Teacher or Instructor

Applicant Name: _____

Field of Study: _____ Related Field: _____

Degree Sought: _____

For Use by Respondent. (Note: The individual named above is being considered for a scholarship. Please provide specific information about the applicant's potential for success in his/her field of study. Feel free to attach a letter of recommendation instead.)

Signature of Respondent _____Date: _____

Name and Title of Respondent: _____

Dept. or Position: _____

Institution (or Employer): _____

My Relationship to the applicant is: _____ Teacher _____Other (Please Explain) _____

NativeVision Scholarship
Letter of Reference

Individual (non-family member)

Applicant Name: _____

Field of Study: _____ Related Field: _____

Degree Sought: _____

For Use by Respondent. (Note: The individual named above is being considered for a scholarship. Please provide specific information about the applicant's potential for success in his/her field of study.)

Signature of Respondent _____Date: _____

Name and Title of Respondent: _____

Dept. or Position: _____

Institution (or Employer): _____

My Relationship to the applicant is: _____ Teacher ____Other (Please Explain) _____