NativeVision Scholarship

Purpose
Established in 1996, NativeVision gives annually a $5,000 college scholarship to outstanding American Indian young people with a commitment to education, athletics and leadership.

Eligibility
Candidates must:
1. Provide proof of tribal membership, or denote why proof is not applicable;
2. Demonstrate a sustained involvement in tribal community and an applied concern for Indigenous issues and initiatives;
3. Maintain a grade point average (GPA) of 3.0 or higher at the time of application;
4. Demonstrate involvement in extracurricular, athletic activities, and/or additional learned skills (e.g., languages, computer skills, software/ programs fluent in, etc.);
5. Be admitted to an accredited community college or four-year undergraduate program (for fall 2022).

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 services, athletic activities, additional skills, and financial information.
- Proof of tribal membership or information on lack of proof.
- Copy of your acceptance letter to school in the fall of 2022.
- 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 communities.
- High school transcript indicating GPA of 3.0 or higher.
- Two (2) completed recommendation forms including written statements from recommenders (recommendations cannot come from a family member).
- PLEASE MAKE SURE YOUR NAME IS ON ALL APPLICATION MATERIALS & ESSAYS.

Application Submission
Submit completed applications to:
Marlena Hammen
NativeVision Scholarship
Johns Hopkins Center for American Indian Health
415 N. Washington Street
4th Floor
Baltimore, Maryland 21231
Telephone: 410-955-6931; Fax: 410-955-2010

Applications must be received by Ms. Hammen no later than May 20, 2022 at 5pm (EDT)
APPLICANT INFORMATION

Name: ____________________________________________________________

Permanent Address: __________________________________________________

Home Telephone: ___________________________ Cell Telephone (Applicable):________________________

Email Address: ______________________________________________________

Date of Birth: __________ Place of Birth: ________________________________ Sex: ______

Name of High School Attended: _________________________________________

Name and Address of Tribal Affiliation: __________________________________

Parents: _____________________________________________________________

List College or University accepted in or attending (Name, City and State): _____________________________

Intended Major: _______________________________________________________

School Activities (ex: clubs, student council, student yearbook, etc.): _________________________________

Community Service (ex: volunteer work at organizations or in the community): _________________________

Athletics Activities: ___________________________________________________

Strengths & Additional Skills (e.g., languages, computer skills, software/ programs fluent in, etc.): ____________________________________________

List any Awards/Honors you have received (ex: Honor Roll, Principal List, Math achievements, etc.): _________________________________
Essay: See topic above and present on separate sheet(s) of paper.

Parents or Guardian

Full Name: ________________________________________________________________

Address: __________________________________________________________________

__________________________________________________________________________

Telephone: __________________________________________________________________

List Expected Expenses of the College you will be attending
(Ex. Tuition, room & board, books, etc.)

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

List Other Financial Assistance Applied for and/or receiving:

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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)