



Strong Family Health Center Scholarship Application

Application must be submitted by April 13, 2023 to be considered.

Name: _____ Telephone: _____

Address: _____ Age: _____

City: _____ State: _____ Zip Code: _____

Place of Birth: _____ D.O.B. _____

Tribal/Nation Affiliation: _____

School Attended : _____ Grade Point Average: _____

Mothers Name: _____ Fathers Name: _____

Please Note: Official transcript in a sealed envelope must be attached and should include all courses completed, including current grades.

Courses currently in progress during spring semester:

1) _____ 2) _____

3) _____ 4) _____

5) _____ 6) _____

Honors/Awards: list any honors or awards you have received

1) _____ 2) _____

3) _____ 4) _____

5) _____ 6) _____

In School Activities: List up to three activities that you're involved in at school. Describe each activity briefly and why this activity is important to you.

1.) _____

2.) _____

3.) _____

Out of School Activities: List up to three activities that you're involved in outside of school. Describe each activity briefly and why this activity is important to you.

1.) _____

2.) _____

3.) _____

Did you participate in SFHC Title VI Tutoring or Youth Group Program? If so, how have these programs helped encourage you to reach out for higher education or leadership within your native community?

Signature

Date

Attach three letters of recommendation from 1) Principal/Counselor/Teacher 2) Tribal Member 3) Community Member in sealed envelopes. Also include a 400-600 word essay describing the importance of advanced education training. Please also tell us about your heritage and why that's important to you; how you plan to give back to your community and finally what obstacles you have had to overcome throughout your academic career.

Please note: An incomplete application will not be reviewed by the Board of Directors.