



Earl and Jane Ferguson Scholarship Application

Eligibility Requirements	For graduating seniors of Klamath County high schools who are also Klamath County residents. Planning to attend an educational institution in the United States. Recipients must be attending school full-time.		
Award Information	Award amount varies. One-time award.		
Due Date for Application Submission	Apr 3, 2017 (extended)	Today's Date	

Student Name	Last Name	First Name	Middle Initial
Student Mailing Address			
Student Email Address			
Student Home Phone		Student Cell Phone	

School Information

Name of Grade School Attended			
Name of Junior High/Middle School Attended			
Name of High School Attended			
High School Grade Point Average		Class Standing	_____ out of _____
College, University, or Educational Program You Plan to Attend			
Mailing Address of Institution			
Intended Major			
Intended Profession or Career			
Student ID (at college), if known			
When Do You Plan to Enroll?		Have You Been Accepted to Date?	Yes _____ No _____
Year in College Next Year (freshman, sophomore, etc.)		Intended Year of Graduation	

You may be eligible for other scholarships through the Office of Student Access and Completion. See www.oregonstudentaid.gov for information.

Activities Chart

Please list below the activities in which you have participated. Start with most recent activities and list in reverse chronological order. Add or delete rows as needed.

Type of Activity	Dates From - To	Time Spent		Responsibilities / Accomplishments
		Hours per Month or Week	Total Hours	
School/Family/Community Activities:				
(1)				
(2)				
(3)				
Volunteer Service:				
(1)				
(2)				
(3)				
Work for Pay:				
(1)				
(2)				
(3)				

Achievements and Honors List

Please detail below notable achievements, accomplishments, honors or awards related to academics or leadership. Start with most recent first and list in reverse chronological order. Add or delete rows as needed.

	Date	Achievement / Honor
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		

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Financial Information

Please list below a summary of your financial status.

For which calendar year is this summary?			
Family Assets	Total balance in cash, savings and checking:	\$	
	Net worth (value minus debt) of investments, including real estate:	\$	
	Total Assets:	\$	
Family Annual Gross Income	Parent/Guardian(s):	\$	
	Student:	\$	
	Student spouse (if married):	\$	
	Total Income:	\$	
Number of households supported by gross income:			
Number of dependents supported by gross income:			
Number of household members attending college this year:			
Did you complete the Free Application for Federal Student Aid (FAFSA)? If so, please answer the questions to the right.	What is your Expected Family Contribution (EFC)?	\$	
	Are you eligible for a Pell Grant?	<input type="checkbox"/>	Yes
		<input type="checkbox"/>	No
	Are you eligible for an Oregon Opportunity Grant?	<input type="checkbox"/>	Yes
		<input type="checkbox"/>	No
What is the amount of student loans you expect to take out?	\$		
Cost of Attendance	Tuition	\$	
	Estimated Fees	\$	
	Books	\$	
	Room and Board	\$	
	Transportation	\$	
	Other (please specify): _____ _____	\$	
	Total:	\$	
Please explain in your own words your financial need and why this scholarship is important to you to be able to attend the college of your choice?			

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Personal Statements

Please write four short essays addressing the following topics. Identify your essays by number or begin each with the essay topic, so that we know which essay is connected with each topic. The essays should be no longer than 150 words each.

1. What are your specific educational plans and career goals and why? What inspires you to achieve them?
2. What have you done for your family or community that you care about the most and why?
3. Describe a personal accomplishment and the strengths and skills you used to achieve it.
4. Describe a significant change or experience that has occurred in your life. How did you respond and what did you learn about yourself?

Demographic Information

Please check the boxes.

Date of Birth¹		Gender¹	<input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Trans Female/Trans Woman <input type="checkbox"/> Trans Male/Trans Man <input type="checkbox"/> Non-binary/Genderqueer/Gender non-conforming <input type="checkbox"/> Different Identity: _____ <input type="checkbox"/> Choose Not to Say
Ethnicity¹	<input type="checkbox"/> White <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> American Indian or Alaska Native	<input type="checkbox"/> Black or African-American <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> Multi-ethnic <input type="checkbox"/> Choose Not to Say	
Family Education History¹	Highest school your father completed <input type="checkbox"/> Elementary School <input type="checkbox"/> Middle School <input type="checkbox"/> High School <input type="checkbox"/> College or Beyond <input type="checkbox"/> Don't Know	Highest school your mother completed <input type="checkbox"/> Elementary School <input type="checkbox"/> Middle School <input type="checkbox"/> High School <input type="checkbox"/> College or Beyond <input type="checkbox"/> Don't Know	

¹ The demographic information is being collected to analyze aggregate data on students who apply and receive scholarships from OCF. This information will be kept confidential and will not be used to influence scholarship award decisions.

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Requirements for Submission

A complete application packet must include the following, please check the box to confirm you have included each piece.

	Complete Application Form
	Personal Statements
	Official School Transcript(s)
	Three (3) Letters of Recommendation, with at least one being from a current teacher or school administrator

By signing this form, I, the applicant, certify the accuracy of the information I have provided. Also, I authorize (1) OCF to share this information with scholarship staff, donors and selection committee members and (2) OCF or scholarship selection committee members to contact school officials for additional information, if needed.

Applicant Signature and
Date

Publicity release: If selected to receive a scholarship, I give permission for a publicity release.

Submit Application Packet to:

The Oregon Community Foundation
Heidi Binder
818 W Eighth St.
Medford, OR 97501
541.773.8987
hbinder@oregoncf.org

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