

Oregon High School Rodeo Scholarship Foundation

SCHOLARSHIP INFORMATION!

Athletic Scholarships—awarded at State Finals to the graduating seniors who earn the highest points in each rodeo event from the year end standings.

- **FUNDING** for this scholarship comes from the Annual Auction at State Finals.
- Each member family is to bring an item to the auction and everyone is invited.
- The Auction is always held Wednesday evening, following the scholarship interviews.
- Senior members will participate and help show items during the auction.
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BOWERMAN RODEO SPORTSMANSHIP SCHOLARSHIP FUND-

Administered by the Oregon Community Foundation **OCF**

This is a renewable award contingent on funds available.

(formerly known as) **Academic Scholarship**—awarded at State Finals to the graduating seniors who qualify.

To Qualify...seniors must qualify for state, interview and maintain a 2.5 cumulative high school GPA. If for some reason only two of these three qualifications are met, a student can apply and interview and the committee will consider funding under a hardship clause. **TO APPLY:**

- **Seniors must send:**
 1. Bowerman Rodeo Sportsmanship Scholarship Applicant Form
 2. a sealed high school transcript, indicating a cumulative GPA of at least a 2.5
 3. a resume', including home address, phone numbers, and email address, achievements in school, community, and rodeo, work and volunteer experience.
 4. a one-page essay or letter of introduction about yourself and your plans, hopes, dreams, and goals. Maybe you are extremely grateful for some event or person in your life and want to share that. Photographs may be included, but are not required.
- Seniors must mail this packet of information by May 1st to: Lori Peila
POB 723
Hines, OR 97738
- Seniors must interview with a panel of judges on Wednesday at the State Finals.
- Money for this scholarship is provided by the extremely generous donation of Mr. Jon Bowerman and is disbursed through the Oregon Community Foundation.

Bowerman Rodeo Sportsmanship Scholarship Application

Student Name	Last Name	First Name	Middle Initial
Student Mailing Address			
Student Email Address			
Student Home Phone		Student Cell Phone	
Student Pronouns			
Name and City/State of High School Attended			
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			
Year in College Next Year (freshman, sophomore, etc.)		Estimated Cost of Attendance Next Year (tuition, fees, books, housing, etc.)	
Date of Birth		Gender	<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
Race/Ethnicity	Choose more than one, if applicable. <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"/> Other: _____ <input type="checkbox"/> Choose Not to Say		
Family Education History	Highest education completed by Parent 1/Caregiver 1 <input type="checkbox"/> Elementary School <input type="checkbox"/> Middle School <input type="checkbox"/> High School <input type="checkbox"/> College or Beyond	Highest education completed by Parent 2/Caregiver 2 <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	<input type="checkbox"/> Don't Know
<p>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.</p>		
Applicant Signature and Date		
<input type="checkbox"/> Publicity release: If selected to receive a scholarship, I give permission for a publicity release.		

Please Submit This Form and Your Full Application Packet to:
<p>Lori Peila Scholarship Committee POB 723 Hines OR 97738</p>

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