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Oregon Pacific Bank Scholarship Application

First Name: _____	Last Name: _____
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Oregon Pacific Bank Scholarship Eligibility and Procedures

This scholarship was established in 1981 to encourage and recognize outstanding high school seniors in our communities. We award one scholarship for \$2000 in each of the specified geographic areas. Applicants must be in the current year graduating class in the following schools or geographic areas: Siuslaw/Mapleton, Douglas County, Coos County, Jackson County, Eugene/Springfield, Tigard/Tualatin.

Applicants do NOT need to be a client of Oregon Pacific Bank to apply.

Eligibility

1. Applicant must demonstrate intent to pursue either an academic or vocational career at an accredited college, university, or vocational institution.
2. Primary consideration in selecting the candidate will focus on leadership in community service or extra-curricular activities while maintaining credible academic achievement.
3. **Applicant must:**
 1. Present information on their financial need by submitting pertinent information to the scholarship committee.
 2. Provide a Grade Transcript from their current school.
 3. Provide TWO letters of recommendation written & signed by someone not related to the applicant.
 4. Provide a personal essay.

One scholarship in the amount of \$2,000 will be awarded to one student at each of the five communities listed above, and shall be paid directly to the student's college, university or vocational institution. It is the student's responsibility to provide the Oregon Pacific Bank Scholarship Committee (Attn: Deborah Kingry, P.O. Box 22000, Florence, Oregon 97439) with proof of enrollment in order for the scholarship to be paid. Failure to claim the scholarship within one school year will result in forfeiture.

Procedures

Applications are due to Oregon Pacific Bank by **5pm on the first Friday in April**. The OPB Scholarship Committee will act on the applications. Incomplete applications or applications submitted after the deadline will not be considered.

The award is to be announced and presented according to each school's method of presentation. The award will be accompanied by a letter of instruction detailing how the money will be disbursed for the benefit of the student.

Questions concerning this scholarship should be made to the Oregon Pacific Bank Scholarship Committee: (541) 997-7121

PERSONAL INFORMATION

	Cell #	Home #	Email
Contact Information			
Mailing Address (required)	Address Line 1 _____ Address Line 2 _____ City _____ State _____ ZIP Code _____		
Please identify which geographical area your High School is located in to confirm eligibility (required)			

(required) I certify I am NOT immediate or extended family member of a current full-time or part-time Bank employee (which includes any dependent child—legally adopted, foster child or step child—including that of a domestic partner).

PARENT/GUARDIAN INFORMATION

	Name	Phone #	Email	Occupation
Parent 1	_____	_____	_____	_____
Parent 2	_____	_____	_____	_____
Guardian (if any)	_____	_____	_____	_____

Best Mailing Address to Contact Parents or Guardian (required)

Address Line 1 _____

Address Line 2 _____

City _____ State _____ ZIP Code _____

EDUCATION

	Name of High School	GPA
High School Information	_____	_____

Address of High School (required)

Address Line 1 _____

Address Line 2 _____

City _____ State _____ ZIP Code _____

	Institution Name	Location
Colleges/Universities/Vocational Schools under consideration, listed by priority (required)	_____	_____
	_____	_____
	_____	_____
	_____	_____

Major Field of Study	Expected Degree	Career Goal(s)
_____	_____	_____

	Place of Work	Duration	Type of Work
Are you currently working, or have you worked during high school? Please give us details on places of employment, duration, and type of work. (required)	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

ESTIMATED ANNUAL COST of EDUCATION

Estimated \$ Amount

Tuition and Fees _____

Room and Board _____

Books and Supplies _____

Transportation _____

Anticipated Personal Expenses (clothing, laundry, recreation, etc.) _____

Unusual or major expenses for which applicant is responsible _____

Total estimated financial need per year of college _____

Other Resources (required)	Details	Estimated \$ Amount
	Scholarship(s)	_____
Loan (s)	_____	_____
Savings	_____	_____
Family Financial Assistance	_____	_____
Work/Study	_____	_____
Employment	_____	_____
Other	_____	_____

If family cannot assist financially, please explain:

Siblings/others dependent on the family: (attach an additional document if necessary)	Name	Relationship	Age
	_____	_____	_____

Please select one: (required)

College would not be possible without scholarship assistance.

College would be difficult without scholarship assistance.

College is not dependent upon scholarship assistance.

Please provide a brief 4 paragraph maximum essay that shares information about you that is not evident in the rest of this application, including school experiences, community activities, honors to date, extracurricular activities, positions of responsibility, club, athletics, etc. (required)

Please submit this information as an additional attachment.

You MUST include your GRADE TRANSCRIPTS, TWO signed letters of RECOMMENDATION, and any additional documents you'd like to include with your application here. (required)
Grade Transcripts and two signed letters of recommendation are required.

Please submit this information as a/n additional attachment(s). Failing to provide all required attachments, including SIGNED letters of recommendation, will result in an incomplete application. Incomplete applications will not be considered.

ACKNOWLEDGEMENT

All statements in this application are correct to the best of my knowledge. (required)

- Yes
- No

Applicant Signature (required) *typing your name counts as a signature.

Applicant Name

Date of Application
