

Silverton Alumni Scholarship

Application and Instructions

(Award for School Year 26-27)

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All sections and all blanks in the application must be completed.

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Anticipated budget for the **next academic year** (both resources and costs) must be completed and **balanced with equal totals**.

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Application must be signed and dated. Your signature, either personally or electronically signed or typed, states that you, the student, are the primary contributor of this application.

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You must **attach** a copy of your complete and current SHS transcript (front and reverse). An **“unofficial”** copy of your SHS Transcript is acceptable. Also - **any and all other additional academic transcripts must be included (e.g. Chemeketa) for courses completed while a student at SHS if the courses are not included on the SHS transcript.**

AND

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Graduating seniors – must complete the scholarship information form at this link <https://airtable.com/appnVcZ6kFAeVCC9q/shrKka6BAafoRvtYo> and upload this application and attached transcripts no later than March 15, 2026. Your application has to be complete, signed, dated and timely submitted to be considered on its merits. **Do not send to or through SHS.**

OR

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Post High School applicants – In **addition to the required unofficial** copy of your Silverton High School transcript you must provide **OFFICIAL copies of ALL your College transcript(s)**. If your transcript does not include a record of current classes, please provide documentation indicating the classes in which you are currently enrolled. **All transcripts must be included with this Application. Unofficial copies from Student or online accounts are not acceptable. An electronic file of official transcripts will be accepted if they come directly from the institution to our email at silvertonalumni@gmail.com.**

AND:

Post High School applicants must complete the scholarship information form at this link <https://airtable.com/appnVcZ6kFAeVCC9q/shrKka6BAafoRvtYo> and upload this application and attached transcripts no later than March 15, 2026. Your application has to be complete, signed, dated and timely submitted to be considered on its merits. **Do not send to or through SHS.**

KEEP this Cover Sheet for your records.
Submit pages 1 – 4 as your Application

Silverton Alumni Scholarship Application

(Award for School Year 26-27)

All applicants must complete the scholarship information form at this link <https://airtable.com/appnVcZ6kFAeVCC9g/shrKka6BAafoRvtYo> and upload this application and attached transcripts no later than March 15, 2026. Your application has to be complete, signed, dated and timely submitted to be considered on its merits.

This application is to be used by qualified applicants who are graduating or have graduated from SHS and desire to apply for SHS Alumni Association scholarship awards to include: Craig and Gladys Clark; Phil Clites; Glen Damewood – Wooden Nickel; Bill Dibala; Ernie and Eleanor Hento; P.A and Marie Loar; Clarence and Norma Medack; Dorathy Nathman Nursing; Errol and Eaden Ross; Carmen Joy Cochran Smith; and Doug Strom Scholarships.

Awards will be granted only to Silverton High School graduates who will be attending **full time as an undergraduate student** (Full-time is 12 or more Credits per academic Term/Semester) any accredited public or private post-high school educational/vocational institution **in the United States for the full academic year.** **Alumni with Bachelor's Degrees are ineligible.**

Name: _____

Permanent

mailing
address:

City

State

Zip

E-mail address: _____

Cell phone number: _____ Social Security: Upon Request.

Alternate phone #: _____ Year of graduation from Silverton High: _____

Mailing address of

School you plan
to attend:

Street or P O Box

City

State

Zip

Major Field of study: _____

Expected college graduation date: _____

Applied for admission? ____ Yes ____ No Have you been accepted? ____ Yes ____ No

Currently attending college full-time? ____ Yes ____ No

Currently attending college part-time? ____ Yes ____ No

COMPLETE THE FOLLOWING:

Brothers and sisters (please include a statement of their current activities, i.e., student, living at home, college, etc.)

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Father's name: _____

Occupation: _____

Mother's name: _____

Occupation: _____

Your work experience:

Your Career goal(s):

School and community extracurricular activities in which you have participated during the present and previous three years, please note whether in HS or college:

Example

	Frosh	Soph	Jr	Sr
<u>Football</u>	<u>C</u>	<u> </u>	<u>HS</u>	<u>HS</u>
<u>Hospital Auxiliary</u>	<u> </u>	<u>HS</u>	<u>HS</u>	<u>HS</u>
<u>Band</u>	<u>C</u>	<u>HS</u>	<u> </u>	<u>HS</u>

Note: Post HS and pre-College activities can also be entered into a column as PHS.

[illegible]

ANTICIPATED BUDGET FOR SCHOOL YEAR

Total anticipated resources and total expected costs MUST EQUAL each other.

You must add up the anticipated resources column and enter the total. You must also add the expected cost column and enter the total. These two totals must equal each other.

Anticipated Resources for the year	Expected Costs for the year
Personal savings to be used _____	Tuition and fees _____
Projected summer earnings _____	Room and board _____
Planned family contribution _____	Books & supplies _____
Projected school year earnings _____	Medical premium/costs _____
Scholarships/Grants already guaranteed _____	Car payments & costs.. _____
	Transportation costs . . . _____
	Miscellaneous expenses (specify)
_____	_____ _____
_____	_____ _____
_____	_____ _____
Additional funds needed _____	
Total Anticipated Resources _____	= Total Expected Costs _____

I BELIEVE ALL OF THE INFORMATION IN THIS APPLICATION AND THE ATTACHMENTS IS TRUE. I HAVE READ AND AGREE TO BE BOUND BY THE TERMS OF THE SCHOLARSHIP AND I AGREE THAT IF I DO NOT ATTEND AS A FULL TIME STUDENT (12 or more Credit Hours per Term/Semester) AT AN ACCREDITED INSTITUTION IN THE UNITED STATES FOR A COMPLETE SCHOOL YEAR THAT I WILL RETURN THE AWARD. YOUR SIGNATURE, EITHER HAND-WRITTEN, TYPED OR ELECTRONIC, IN THE FIELD BELOW, STATES THAT YOU, THE STUDENT, ARE THE PRIMARY CONTRIBUTOR TO THIS APPLICATION.

SIGNED: _____ **DATE:** _____

(APPLICANT'S SIGNATURE)

Admin processing notes:	Received before March 15 th Deadline	Y	N	
Rec'd _____	Balanced Budget:	Y	N	
	HS transcript unofficial (required for all):	Y	N	
Completed _____	All College Transcripts Official :	Y	N	NA
	Complete Application:	Y	N	
	Social Security Number: Upon Request			
Admin Comments: _____				