



2027 APPLICATION

The Application is Available on <https://www.thompsonpatchscholarships.org/>

The Nellie Thompson-Dorothy Patch Scholarship Fund was established to provide scholarships to graduating high school students from the Salem-Keizer School District and Chemawa Indian School who identify as Native American, Latinx, Black, Asian, Pacific Islander, or otherwise as a person of color.

We are dedicated to helping those students of color who have overcome difficult life challenges, support their community, show a strong desire to give back to their community in the future, and find it difficult to obtain education and training beyond high school.

In awarding the scholarships, the selection committee will be particularly interested in improvement in academic performance, extracurricular activities, and future academic and career goals. Grade point average will be considered but is NOT a major factor in our decision to award a scholarship.

All material submitted becomes the property of the Nellie Thompson-Dorothy Patch Scholarship Committee. Please take care in completing the application. Incomplete applications are subject to rejection.

Eligibility

- Graduating high school students in the Salem-Keizer School District and Chemawa Indian School
- Students who identify as Native American, Latinx, Black, Asian, Pacific Islander, or otherwise as a person of color
- Complete Short Answers and Essay
- Provide transcripts and all electronic materials to thompsonpatchfund@gmail.com or mail to Thompson-Patch Scholarship Fund, P.O. Box 13584, Salem, OR, 97309

First & Last Name _____ Personal Email _____

Alt. Email _____

Address _____

City _____ State _____ Zip _____

Phone No. _____ Alt. Phone No. _____

High School _____ Graduation Date _____

Race/Ethnicity _____



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Please respond to the following questions with short answers (no more than 250 words):

What are your educational and career goals?

What schools have you applied or intend to apply to?

What will be your area of study and expected degree?

Essay prompt (no more than 2 pages):

Describe challenges you have faced in your life and how you have met those challenges; why you wish to pursue further education and training; how you will use your education and training to benefit yourself and give back to your community; and what accomplishing your educational and training goals will mean to you.

Please take care in completing the application. Incomplete applications are subject to rejection.

Mail all application forms, transcript and letters of reference to:

NelliThompson-Dorthy Patch Scholarship Fund, P.O. Box 13584, Salem, OR 97309

Date Due February 1, 2027

Scholarship Application Check List

- ☐ Cover page completed **with email clearly printed**
- ☐ Application form completed **with responses to all questions** (Page 2)
- ☐ Completed essay is **attached and signed**
- ☐ **Official Transcript** provided
- ☐ **One (1) reference** is provided

Publicity Release

I hereby authorize Nellie Thompson-Dorothy Patch Scholarship Fund, Inc., hereafter referred to as "Thompson-Patch Scholarship Fund," to publish photographs taken of me and my name and likeness, for use in the Fund's print, online and video-based marketing materials, as well as other Fund publications.

I hereby release and hold harmless Thompson-Patch Scholarship Fund and its Board of Directors from any reasonable expectation of privacy or confidentiality associated with the images specified above.

I further acknowledge that my participation is voluntary and that I will not receive financial compensation of any type associated with the taking or publication of these photographs or participation in company marketing materials or other Fund publications. I acknowledge and agree that publication of said photos confers no rights of ownership or royalties whatsoever.

I hereby release Thompson-Patch Scholarship Fund and its Board of Directors, its contractors, its employees, and any third parties involved in the creation or publication of marketing materials, from liability for any claims by me or any third party in connection with my participation.

Authorization

Printed Name: _____

Signature: _____ Date: _____ 2027

Street Address: _____

City: _____ State: _____ Zip: _____

Reference Form

Recommender Information:

First & Last Name: _____

Email: _____ Phone Number: (____) _____

Short Answers:

Please answer the following questions to give us insight on the student applicant.

1. How long have you known the student? In what circumstances?
2. Why are you recommending that the student be awarded a Thompson-Patch Scholarship?
3. What challenges has the student faced in life and how has the student met those challenges?
4. How has the student shown the desire and ability to pursue higher education?
5. How has the student show the desire and ability to serve the needs of others or their community as a whole?
6. Anything else you would like us to know about this student?

We'll be in touch to confirm that we received you're reference. Any questions? Reach out to:
thompsonpatchfund@gmail.com