

# LINCOLN COUNTY FOUNDATION

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## SHARON BUTLER MEMORIAL SCHOLARSHIP APPLICATION

**The purpose of the Sharon Butler Memorial Scholarship is two fold:**

**First**, the scholarship was created to recognize and honor the achievement and contributions of Sharon Butler. Sharon was the manager of the USDA Food Program for the Confederated Tribes of Siletz. She spent her entire adult life in service to her tribe and family. Known as “Auntie”, she was a tremendous resource to the community, and a steady and stabilizing influence in her family. On June 2, 1992, she was killed in a collision caused by a drunk driver as she completed her final preparations for a trip to Washington, D.C. to represent the Siletz Tribe at a housing conference. Her good work was the inspiration for this scholarship.

**Second**, the scholarship is designed to promote the educational development and tribal leadership of Siletz tribal members who are residents of Lincoln County and who are about to begin college, by providing financial assistance and recognition to them for the critical first year of their college career.

### **BACKGROUND**

The scholarship was created by contributions from Sharon’s husband, Ron Butler, Ray Thomas of Royce, Swanson, Thomas, and Coon (her lawyers), and contributions from family and friends. Grace Castle provided her considerable organizational energy in getting the scholarship established and Rex Krabbe of the Lincoln County Foundation and Bob Tom from the Siletz Tribe provided much assistance in creating procedure for operation of the fund.

Sheryl Simmons joined us in 1996. She is the manager of the tribe’s bingo game and is Sharon’s sister-in-law and close friend.

Bob Tom retired in 1997 and was replaced in 1998 by interim Higher Education Specialist Kelly Ball. In 1999 Bev Youngman, Programs Manager, Confederated Tribes of Siletz Indians replaced Kelly on the Sharon Butler Memorial Scholarship Committee.

### **AWARD**

The Scholarship Committee will annually select the recipient of a \$1,000 award which shall be payable toward rent, food, books, and other living expenses. The scholarship fund will be managed by the Lincoln County Foundation.

### **APPLICATION PROCEDURE**

Applicants must fill out the attached applicant form. The selection committee wants to learn about the applicant, and it is therefore essential that no person except the applicant fill out the application form.

### **COMMITTEE PROCEDURE**

Between April 5, 2021 and April 26, 2021 following the receipt of the completed application packages the selection committee will meet in Bev Youngman's office to examine applications and discuss the field of applicants. Applicants should be prepared to meet with the selection committee for a personal interview if the committee has difficulty choosing the most deserving applicant.

### **AWARD DECISION AND PRESENTATION**

The committee will meet between April 5, 2021 and April 26, 2021 at Bev Youngman's office in the Tribal Administration building on Swan Avenue in Siletz to consider the applications. A decision will be made by May 3, 2021 about the winner of the scholarship.

The winner of the scholarship will then be personally notified, and will be invited to attend the annual August Siletz Tribe Powwow for official recognition and presentation of the scholarship award. Recognition of the award will also be made at the awards ceremony at the recipients Lincoln County high school.

### **CRITERIA OF APPLICANT**

The Sharon Butler Memorial Scholarship will be awarded to a Siletz Tribal member who resides in Lincoln County at the time of application. High school seniors, people who have received a GED or high school equivalency degree, and persons who have taken some college credits may apply for the scholarship so long as they have earned no more than 36 college credits by July 1st of the year in which the application is made. Applicants must be planning to attend any accredited college with the goal of obtaining a two year associates or four year Bachelor's degree.

Completed applications must be mailed to Confederated Tribes of Siletz Indians, Attention Bev Youngman, Programs Manager, P.O. Box 549, Siletz, OR 97380. Contact Info: 541-444-8290, [bew@ctsiins.us](mailto:bew@ctsiins.us), Applications must be in Bev Youngman's office by April 2nd, 2021.

**1. APPLICANT INFORMATION**

Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Home Address: (Current mailing address) \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Male: \_\_\_\_\_ Female: \_\_\_\_\_

Siletz Tribal Member? Yes \_\_\_\_\_ No \_\_\_\_\_

(Applicants must be Siletz Tribal Members who are residents of Lincoln County in order to qualify for this scholarship)

**2. HIGH SCHOOL/GED INFORMATION**

High School: \_\_\_\_\_ Dates of Attendance: \_\_\_\_\_

Cumulative GPA: \_\_\_\_\_ Source of GED: \_\_\_\_\_ Date: \_\_\_\_\_

If more than one high school attended, list most recent and then list previous high schools attended in reverse chronological order. If you need more space than is provided above, continue on separate sheet of paper)

**Official certified copies of your transcripts or GED certificate must be submitted by each high school you have attended.**

**3. UNIVERSITY/COLLEGE INFORMATION**

Name of Institution you will be attending: \_\_\_\_\_

Institution Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Anticipated Area of Study: \_\_\_\_\_

Length of education required to achieve your educational goals: \_\_\_\_\_

What type of degree do you intend to receive at graduation? \_\_\_\_\_

4. **Future Academic Plans (courses, educational interests, etc.**

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5. **Career Plans**

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6. **Tribal/Cultural Activities:** (List membership and involvement in Siletz/Native American Tribal and cultural activities, and the importance these activities have played in your personal development)

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**9. Plan For Use of Scholarship Money:** (Financial need is one of the criteria for award of this scholarship. Please indicate your financial need and the purposes to which you would put the award during your first year of college work)

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**10. Note: The Application requirements include a recommendation from a faculty member or counselor. The written recommendation must be received directly from the school prior to the due date for your application.**

I certify that the foregoing application is true and correct.

Applicant Signature \_\_\_\_\_ Date: \_\_\_\_\_