

Morris K. Udall and John S. McCain III Native American Graduate Fellowship in Tribal Policy

# 2021 Native American Graduate Fellowship Native Health Care

# **Application**

Please read all instructions to ensure that the information you provide is accurate and complete. Applications that do not follow instructions or are incomplete will not be considered by the Selection Committee.

- The application must be typed, using no smaller than 12-point font.
- The short answer questions and optional COVID-19 impact statement should be single-spaced. Please note the word count ranges and do not exceed the maximum word count.

Application deadline: post-marked or emailed by 11:59 PM PDT on May 21, 2021.

 Link to Fellowship guidelines and application material https://www.udall.gov/OurPrograms/Fellowship/Apply.aspx

Application materials may be emailed to Jason Curley, Education Program Manager, at <a href="mailto:curley@udall.gov">curley@udall.gov</a>. Writers of recommendation letters may email signed PDFs directly to <a href="mailto:curley@udall.gov">curley@udall.gov</a>.

Application materials may also be mailed to:

Udall Foundation
Native American Graduate Fellowship Program
130 S. Scott Avenue
Tucson, AZ 85701

#### A COMPLETE APPLICATION CONSISTS OF:

Signe	ed application form (Section 1)
Comp	oleted short answers (Section 2)
Brief	statement explaining any COVID-19 related impacts, optional (Section 3)
Resur	me or Curriculum Vitae (CV) (Section 4)
Three	e recommendation letters sent to the Udall Foundation by the recommenders (Section 5)
Offici	ial transcript from current graduate institution (Section 6)
Final	unofficial undergraduate transcript (Section 6)
Other	r unofficial transcripts from colleges attended for credit within the past six years (Section 6)
Сору	of Tribal enrollment card or Tribal verification documents (Section 6)
(If an	nlicable) Proof of LLS, nermanent residency (Section 6)

## Morris K. Udall and John S. McCain III Native American Graduate Fellowship in Tribal Policy

## 2021 NATIVE AMERICAN GRADUATE FELLOWSHIP - NATIVE HEALTH CARE APPLICATION

# **Section 1: Application Form**

Legal Full	Name:													
Are you a U.S. Citizen U					S. Permaner	nt Resid	lent (Ca	ınadian	First Nat	tion)				
Enrolled Tribal affiliation:														
Additiona	l Tribal aff	iliation	(s):											
State of Po	ermanent	Reside	nce*:											
Congressi	onal Distri	ct (Leg	al Voting D	istrict):	:									
*Permanent vote; family'			•	least tw	o of the follo	wing: h	ome add	lress for :	school re <u>c</u>	gistratic	on; pla	ce of r	egistration	to
Mailing A	ddress													
Street and	d Number:													
City:						State	:			Z	ip:			
Best telep	hone:			В	Best email ac	ddress:								
Will you b	e a contin	uing gr	aduate stu	dent in	Fall 2021:		Yes	. N	0					
Graduate	Degree Pr	ogram	(e.g., M.S.	, Ph.D.,	M.D.):									
Field of St	udy/Conc	entrati	on:			*								
GPA:			On a scal	e of:			Date yo	ou expe	ct to rec	eive de	gree:			
Beginning study abro		chool	you curren	tly atte	end, list all co	olleges,	/univers	sities at	tended, i	includir	ng any	for s	ummer an	d
School					Location				Da	ates At	tende	d	GPA	
Concurrer	nt Grants/	Fellow	vships											
Itemize ar	ny grants c	r fello	wships tha	t will co	incide with	the Fel	lowship	year (A	August 1,	, 2021 -	- July	31, 20	)22).	
Name of 0	Grants/Fe	lowshi	ips					Am	ount					
Signature								Dat	te					

Applications and supporting documents become the sole property of the Udall Foundation and will neither be returned nor submitted to the Selection Committee for evaluation another year.

#### Section 2: Short Answers

360	tion 2. Short Answers
1.	What area(s) of Native American and/or Alaska Native health care are you pursuing with your graduate studies? What motivated you to pursue a career in this field? (300-450 words)

2.	Describe one critical issue in Native American and/or Alaska Native health care and how you hope to address it throughout your educational and professional career? (300-450 words)

3.	Describe your personal journey as a Native American, Alaska Native, or Canadian First Nations member, and how it shapes your goals. (250-300 words)
4.	What experiences and personal/cultural values have shaped your perspective on Native health care services and systems? (250-300 words)

5.	How will you use the Fellowship funds to support your academic and professional goals for the 2021-2022 academic year? (250-300 Words)

6. Provide any additional information that would be useful for the Selection Committee to know. (250-300 words)
Section 3: Optional COVID-19 Impact Statement (100-150 Words)
Briefly explain any COVID-19 related impacts you have experienced that would be important for the Selection Committee to be aware of. This can include significant disruptions to progression through a degree program and/or ability to participate in school, community, or Tribal activities; jobs or internships; research activities; or leadership experiences.

## Section 4: Resume or Curriculum Vitae (CV)

Your resume or CV should observe the following general format: Education History; Professional Experience (e.g., relevant paid and unpaid work experiences, research, publications, presentations); Other Relevant Experience (e.g., Tribal activities, extracurricular and volunteer work); Professional and Tribal Organization Memberships; and Awards and Recognition. (Limit to 4 pages.)

#### **Section 5: Recommendation Letters**

Please provide names, titles, and contact information of three individuals who have written your letters of recommendation for the Native American Graduate Fellowship. Letters should be written on official letterhead, signed by the recommender, and should be submitted separately from the application by the recommender. Please request your recommenders email letters directly to Jason Curley at <a href="mailto:curley@udall.gov">curley@udall.gov</a>.

Name:			Email:	
Title:			Phone:	
Tribal	Official	Community Leader	Faculty Mer	nber Other
Name of		_	Farail.	
Name:			Email:	
Title:			Phone:	
Tribal	Official	Community Leader	Faculty Mer	nber Other
Name:			Email:	
Title:			Phone:	
Tribal	Official	Community Leader	Faculty Mer	nber Other
Please tell	us how you hea	rd about the Native Americ	can Graduate Fellow	yship.
Adver	tisement	Alumni	Direct mailing	Email
Tribe		Faculty/Staff	Graduate school	Native program
Web s	search	Social media	Conference	Udall Foundation
Other	(please specify)	:		
Please tell	us who referred	I you to our program.		

Please provide names and contact information of organizations or people with whom to share information				
about our programs.				
Section 6: Supporting Documents				
<u>Current official transcript</u> – may be submitted separately.				
Final official/unofficial undergraduate transcript(s) – may be submitted separately.				
Other unofficial transcripts from colleges attended for credit within the past six years – may be				
submitted separately.				
Proof of Tribal enrollment or descendance – please do not submit original documents:				
<ul> <li>Copy of enrollment forms, cards, and/or descent documentation such as a certificate of degree</li> </ul>				
of Indian or Alaska Native blood.				
<ul> <li>Descendants of enrolled Tribal members must provide copies of their parent's or grandparent's</li> </ul>				
enrollment and birth certificates that demonstrate the applicant's relationship to the enrolled				
Tribal member.				
Proof of U.S. permanent residency – for First Nations of Canada members only.				