

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

## 2023 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 the space provided. Separate documents should use 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: emailed by 11:59 PM PDT on May 19, 2023.

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

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

#### A COMPLETE APPLICATION CONSISTS OF:

Ш	Signed application form (Section 1)
	Completed short answers (Section 2)
	Brief statement explaining any COVID-19 related impacts, optional (Section 3)
	Resume or Curriculum Vitae (CV) (Section 4)
	Three recommendation letters sent to the Udall Foundation by the recommenders (Section 5)
	Official transcript from current graduate institution (Section 6)
	Final unofficial undergraduate transcript (Section 6)
	Other unofficial transcripts from colleges attended for credit within the past six years (Section 6)
	Copy of Tribal enrollment card or Tribal verification documents (Section 6)
П	(If applicable) Proof of LLS, permanent residency (Section 6)

## Morris K. Udall and John S. McCain III Native American Graduate Fellowship in Tribal Policy 2023 NATIVE AMERICAN GRADUATE FELLOWSHIP - NATIVE HEALTH CARE APPLICATION

### **Section 1: Application Form**

Legal Full Name:	Legal Full Name:					
Are you a U.S. Citizen U.S. Per	rmanent R	Resident (Canadiar	n First I	Nation)		
Enrolled Tribal affiliation:						
Additional Tribal affiliation(s):						
State of Permanent Residence:	· · ·					
Permanent residence is established by at least two of the following: home address for school registration; place						
of registration to vote; family's primary residence.						
Congressional District (Legal Voting Dist	rict):					
Mailing Address						
Street and Number:						
City:	9	State:		Zi	o:	
Best telephone:		Best email addr	ess:			
Will you be a continuing graduate stude	nt in Fall 2	2023: Yes	No			
Graduate Degree Program (e.g., M.S., Ph	h.D., M.D.	):				
Field of Study/Concentration:						
GPA:		On a scale of:	On a scale of:			
Date you expect to receive degree:	Date you expect to receive degree:					
Beginning with the school you currently	attend, lis	st all colleges/univ	ersitie/	s attend	led, including	any for
summer and study abroad:						
School	Location	1		Date	s Attended	GPA
Concurrent Grants/ Fellowships						
Itemize any grants or fellowships that w	ill coincide	e with the Fellows	ship yea	ar (Augu	st 1, 2023 – Ju	ıly 31, 2024).
Name of Grants/Fellowships			Amou	ınt		
				_		
Signature				Date		

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**

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 ho 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)
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1	What experiences and personal/cultural values have shaped your perspective on Native health care
4.	What experiences and personal/cultural values have shaped your perspective on Native health care services and systems? (250-300 words)
4.	What experiences and personal/cultural values have shaped your perspective on Native health care services and systems? (250-300 words)
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5.	How will you use the Fellowship funds to support your academic and professional goals for the 2023-2024 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 Facult	ty Member		
Name:	Email:		
Title:	Phone:		
	ty Member U Other		
Name:	Email:		
Title:  Tribal Official Community Leader Facult	Phone: ty Member Other		

Advertisement Alumni Direct mailing **Email** Tribe Faculty/Staff Graduate school Native program Web search Social media Conference **Udall Foundation** Other (please specify): Please tell us who referred 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.

Please tell us how you heard about the Native American Graduate Fellowship.

- <u>Final official/unofficial undergraduate transcript(s)</u> 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:
  - Copy of enrollment forms, cards, and/or descent documentation such as a certificate of degree of Indian or Alaska Native blood.
  - Descendants of enrolled Tribal members must provide copies of their parent's or grandparent's 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.

# Thank you for your interest in the Udall Native American Graduate Fellowship! Privacy Act Notice

**General:** This notice is provided pursuant to Public Law 93-579, Privacy Act of 1974, 5 U.S.C. Section 552a, for individuals supplying information to the Morris K. Udall and Stewart L. Udall Foundation (Udall Foundation) in the course of seeking a scholarship, internship, and/or fellowship.

Authority: Sections 5604, 5605 of Title 20 of the U.S. Code authorize collection of this information.

**Purposes and Uses:** This information is collected for the purpose of evaluating applicants for scholarships, internships, fellowships, and similar positions. This information will be disclosed to personnel within the Udall Foundation and to other personnel outside of the Udall Foundation as required by Udall policies and procedures for the review, award, and administration of the scholarship, internship, and/or fellowship program(s). Contact information for alumni of the scholarship, internship, and/or fellowship program(s) may be used the Udall Foundation to contact individuals about events or issues related to the Udall Foundation programs and mission.

**Effects of Nondisclosure:** Individuals are not required to apply for scholarships, internships, or fellowships through the Udall Foundation programs. Submission of applicant information is voluntary. Failure to supply the information could prevent the Udall Foundation from considering the individual for a scholarship, internship, and/or fellowship.