

Thank you for your interest in the

DICKEY EDUCATIONAL ENDOWMENT - 2021

This fund is created to honor my brother, Mark Wayne Dickey, and father, Robert Clayton Dickey, whose lifetime struggles with alcoholism and/or addiction took them from our family far too early.

I have witnessed four generations of my family and others battle the effects of addiction. It has ruined lives, families and relationships. It has prevented people from creating the beautiful, fulfilling life they deserve, a vicious cycle of fear, guilt, shame, blame and pain...the disease keeps you captive.

I want to provide hope and betterment to those that have chosen to and made the efforts to get their life back on track.

There is a better way!

This fund is set up to contribute towards the further education of those who have been through a minimum of 30 day (in patient) or 60 day (out-patient) credentialed drug and alcohol rehabilitation program and have been clean and sober for a minimum of one year, to be attested to by a health care professional or qualified professional.

Further education includes college, university or other educational institutions providing vocational, technical or secondary education programs.

This fund is set up to promote personal improvement and educational development in order to secure a career plan.

A minimum of \$2500. per year scholarship(s) depending on the requests will be given to a qualified person(s) that has been through the vetted application process.

Thank you for your interest and many blessings to you.

Sincerely,

Founder - Dickey Educational Endowment Fund

CRITERIA FOR SELECTION OF RECIPIENTS:

The recommended guidelines for selection of a recipient will include the following:

- * Be at least 18 years old
- * Completed either a minimum of 30 day inpatient/60 day outpatient credentialed drug/alcohol rehabilitation and have been clean and sober for at least one year (both attested to by a qualified professional)
- * Applicant must be attending or enrolled in a community college, college, university, technical or vocational school (GED enrollment not applicable)
- * Applicant must be a resident of Central Oregon for minimum of 2 years and currently reside here
- * Applicant demonstrates financial need
- * Have career goals
- * Volunteer and/or community service activities shown (if applicable)
- * Copy of most current tax return (or parent/guardian tax return if applicant is claimed as a dependent)
- * (3) letters of recommendation (form with details attached) - one from an adult family member and 2 non-family adults. Note - applicant should carefully select who will provide these as the more the individual knows about the applicant's circumstances, background, challenges met, victories, etc. the greater chance of applicant being selected.
- * Bio and essay - see application for requested information

Scholarships will be disbursed directly to the school/program once recipients have provided their student ID or account # for the school/program they will be attending. Provide name of school, department, address, contact person.

Applications will be accepted until APRIL 15, 2021. You will be notified within 48 hours we have received your application and within 30 days you will be notified of status of your application. Final decision will be made prior to June 1, 2021.

MAIL APPLICATIONS TO: ATTN: DICKEY ENDOWMENT - PERSONAL & CONFIDENTIAL

c/o Century Insurance Group, 320 SW Upper Terrace Dr. Bend OR 97702

Questions: 707 496 3891 or goddessbend@gmail.com

DICKEY EDUCATIONAL ENDOWMENT APPLICATION

(use a separate sheet if necessary)

Name _____ **Date** _____

Address (mail and physical) _____

City _____ **State** _____ **Zip** _____ **Phone** _____

Email _____ **Birthdate** _____

Are you a US citizen or Legal Resident Alien? YES or NO

How long have you resided in Central OR? _____

High School _____ **College** _____

Highest Level of Achievement/other schools attended/GPA/Details: _____

Are you employed? (where/occupation/# hours/will you continue to work while attending school)

Marital Status: _____ **# of dependents:** _____

Are you currently living with parents, legal guardian, spouse or other? (details)

Are you applying for or have you received other grants/scholarships? How do you intend to contribute towards this further education?

Will you receive other income such as financial aid, cash awards, loans, child support, alimony, savings, etc. while attending school?

Name and address of school/university/college you are planning to attend:

Start date

Term

Student ID

Degree or career plan you will pursue:

Drug/Alcohol Rehabilitation Program attended:

Name

Contact person/phone #

Address

Reason for attending:

Inpatient/Outpatient and term:

Recovery Program and/or 12 Step Program you have and/or are attending (details - term, place, how often, sponsor?):

PLEASE PROVIDE SEPERATELY - AUTOBIOGRAPHY/ESSAY - include your goals and aspirations, financial need, recovery details and any other information you feel would be applicable to the decision process. (please limit to 3 full pages or less) ****Use a seperate sheet to answer any application questions when necessary**

REFERENCE FORM
DICKEY ENDOWMENT FUND

****PLEASE INCLUDE THE FOLLOWING IN YOUR LETTER OF RECOMMENDATION:**

- 1) Applicant's name***
- 2) How long you have known the applicant and in what capacity?***
- 3) What is your assessment of the application's personal and academic abilities to complete this education program successfully?***
- 4) Are there any unique factors that make this applicant especially worthy of receiving this endowment (special talents, past history, goals, motivation)?***
- 5) Any other information you feel would be pertinent to the decision process?***
- 6) Your name, phone number, place of employment/position or title, signature and date***