



HFO
Post-Secondary Education Scholarship
2020

Name: _____

Current address: _____

Email address: _____

Phone Number: _____

Parent name and address: _____

Parent phone number: _____

School attended most recently _____

School attending for 2020-2021: _____

Name and phone number of reference: _____

List of volunteer activities: _____

List of hobbies: _____

Are you a previous scholarship recipient? ____ Yes ____ No

If so, what year(s) were you awarded the scholarship? _____

All scholarship material must be mailed by July 31, 2020 to:

Hemophilia Foundation of Oregon
Attn: Scholarship Committee
456 SW Monroe Ave, Suite 102
Corvallis, OR 97333