

**OREGON FOSTER PARENT ASSOCIATION  
APPLICATION FOR SCHOLARSHIP  
NFPA 39<sup>th</sup> Annual Education Conference**

**Grand Sierra Resort  
Reno, NV  
May 3 – May 9, 2009**

Name: \_\_\_\_\_

Full Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_

County/Area \_\_\_\_\_ Person Supplying Reference \_\_\_\_\_

Foster       Relative Caregiver

How many years have you been a foster or relative caregiver? \_\_\_\_\_

Why do you want to attend the NFPA Annual Conference? \_\_\_\_\_

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How do you plan to share the information and knowledge that you acquire at the National Conference with other foster or relative caregivers in Oregon? \_\_\_\_\_

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Are you involved with your local foster parent association in your community? Please explain how you are involved and how you serve? \_\_\_\_\_

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