

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

2026 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 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 1, 2026.

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

Application materials must be emailed to the Native American Graduate Fellowship Program at <u>fellowshipprogram@udall.gov</u>. Writers of recommendation letters must email signed PDFs directly to <u>fellowshipprogram@udall.gov</u>.

| | NPLETE APPLICATION CONSISTS OF: Signed application form (Section 1) |
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| | Resume or Curriculum Vitae (CV) (Section 2) |
| | Completed short answers (Section 3) |
| | Three recommendation letters sent to the Udall Foundation by the recommenders (Section 4) |
| | Official transcript from current graduate institution (Section 5) |
| | Final unofficial undergraduate transcript (Section 5) |
| | Other unofficial transcripts from colleges attended for credit within the past six years (Section 5) |
| П | Copy of Federally Recognized Tribal documents (Section 5) |

Morris K. Udall and John S. McCain III Native American Graduate Fellowship in Tribal Policy 2026 NATIVE AMERICAN GRADUATE FELLOWSHIP - NATIVE HEALTH CARE APPLICATION

Section 1: Application Form

| Legal Full Name: | | | |
|--|--|--|--|
| Preferred Name: | | | |
| Are you a U.S. Citizen U.S. Permanent Resident | | | |
| Federal Tribal affiliation: | | | |
| Enrollment Status: Enrolled | | | |
| State of Permanent Residence: | | | |
| Congressional Voter Registration (State/District No.): | | | |
| Permanent residence is established by at least two of the following: home address for school registration; place | | | |
| f registration to vote; family's primary residence. | | | |
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| Contact Information | | | |
| Mailing Address: | | | |
| City: State: Zip: | | | |
| Best telephone: Best email address: | | | |
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| Education | | | |
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| Will you be a continuing graduate student in Fall 2026: Yes No | | | |
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| Will you be a continuing graduate student in Fall 2026: Yes No | | | |
| Will you be a continuing graduate student in Fall 2026: Yes No Graduate Institution: | | | |
| Will you be a continuing graduate student in Fall 2026: Yes No Graduate Institution: Location: Start Date: | | | |
| Will you be a continuing graduate student in Fall 2026: Yes No Graduate Institution: Location: Start Date: Graduate Degree Program (e.g., M.S., Ph.D., M.D.): | | | |
| Will you be a continuing graduate student in Fall 2026: Yes No Graduate Institution: Location: Start Date: Graduate Degree Program (e.g., M.S., Ph.D., M.D.): Field of Study/Concentration: | | | |
| Will you be a continuing graduate student in Fall 2026: Yes No Graduate Institution: Location: Start Date: Graduate Degree Program (e.g., M.S., Ph.D., M.D.): Field of Study/Concentration: GPA: On a scale of: | | | |
| Will you be a continuing graduate student in Fall 2026: Yes No Graduate Institution: Location: Start Date: Graduate Degree Program (e.g., M.S., Ph.D., M.D.): Field of Study/Concentration: GPA: On a scale of: Date you expect to receive your graduate degree (month/year): | | | |
| Will you be a continuing graduate student in Fall 2026: Yes No Graduate Institution: Location: Start Date: Graduate Degree Program (e.g., M.S., Ph.D., M.D.): Field of Study/Concentration: GPA: On a scale of: Date you expect to receive your graduate degree (month/year): Undergraduate Institution: | | | |
| Will you be a continuing graduate student in Fall 2026: Yes No Graduate Institution: Location: Start Date: Graduate Degree Program (e.g., M.S., Ph.D., M.D.): Field of Study/Concentration: GPA: On a scale of: Date you expect to receive your graduate degree (month/year): Undergraduate Institution: Location: Start Date: | | | |
| Will you be a continuing graduate student in Fall 2026: Yes No Graduate Institution: Location: Start Date: Graduate Degree Program (e.g., M.S., Ph.D., M.D.): Field of Study/Concentration: GPA: On a scale of: Date you expect to receive your graduate degree (month/year): Undergraduate Institution: Location: Start Date: Undergraduate Major: | | | |

Date:

and accurate to the best of my knowledge and belief.

Signature:

Section 2: 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 3: Short Answers

| 1. What area(s) of Native American and/or Alaska Native health care are you pursuing with your graduate |
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| studies? What motivated you to pursue a career in this field? (300-450 words) |
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| 2. | Describe one critical issue in Native American and/or Alaska Native health care and how you hope to |
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| | address it throughout your educational and professional career? (300-450 words) |
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| 5. | How will you use the Fellowship funds to support your academic and professional goals for the 2026- |
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| | 2027 academic year? (250-300 Words) |
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| 6. | Provide any additional information that would be useful for the Selection Committee to know. (250-300 words) |
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Section 4: 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 recommendations be emailed directly to the Udall Foundation at fellowshipprogram@udall.gov.

| Name: Email: | | | | | | | |
|---|---|--|------------------|--|--|--|--|
| Title: Phone: | | | | | | | |
| ☐ Tribal Official ☐ Community Leader ☐ Faculty Member ☐ Other | | | | | | | |
| Name: Email: | | | | | | | |
| Title: Phone: | | | | | | | |
| ☐ Tribal Official ☐ Community Leader ☐ Faculty Member ☐ Other | | | | | | | |
| Name: Email: | | | | | | | |
| Title: | Title: Phone: | | | | | | |
| Triba | ☐ Tribal Official ☐ Community Leader ☐ Faculty Member ☐ Other | | | | | | |
| | | | | | | | |
| Please tell us how you heard about the Native American Graduate Fellowship. | | | | | | | |
| Advert | Advertisement Alumni Direct mailing Email | | | | | | |
| ☐ Tribe ☐ Faculty/Staff ☐ Graduate school ☐ Native program | | | ☐ Native program | | | | |
| ☐ Web search ☐ Social media ☐ Conference ☐ Udall Foundation | | | | | | | |
| Other (please specify): | | | | | | | |
| | | | | | | | |
| Please tell us who referred you to our program: | | | | | | | |

Section 5: Supporting Documents

- Current graduate official transcript may be submitted separately.
- Final official/unofficial undergraduate transcript(s) may be submitted separately.
- Other transcripts (unofficial) from colleges attended for credit within the past six years may be submitted separately.
- Documentation of Tribal Enrollment please **do not** submit original documents:
 - Copy of enrollment card or verification documentation from one or more Federally Recognized Indian Tribes that are included in the <u>annual list of Indian Tribes</u> published by the Secretary of the Interior pursuant of 25 U.S.C. § 5131
- Proof of U.S. permanent residency if applicable for non-U.S. Citizens

2026 Program Important Dates:

The following dates are subject to change. Please monitor the important dates section of our website to get updates on any changes. Your understanding is greatly appreciated.

| October 1, 2025 | The application is available at <u>www.udall.gov</u> | | | |
|-----------------------|---|--|--|--|
| May 1, 2026 | Native American Graduate Fellowship applications including Letters of recommendation, transcripts, and other supporting documents must be emailed by 11:59 PM PDT. Incomplete applications will not be reviewed by the selection committee. | | | |
| June 18-26, 2026 | Native American Graduate Fellowship Selection Committee application review period and video interviews with finalists. | | | |
| July 1, 2026 | Udall Foundation notifies all applicants of the Native American Graduate Fellowship results. | | | |
| July 8, 2026 | Deadline for Udall Foundation receipt of Native American Graduate Fellowship Consent and Release form. | | | |
| July 16, 2026 | Deadline for Udall Foundation receipt of all Native American Graduate Fellowship forms. | | | |
| July 30, 2026 | Native American Graduate Fellows announced at <u>www.udall.gov</u> | | | |
| Aug. 2026 – Aug. 2027 | Native American Graduate Fellowship Period. | | | |

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.