



**Principal Certification**

I certify that this student is enrolled and in good academic standing at \_\_\_\_\_  
High School as of \_\_\_\_\_ (date). I further certify that this  
student is low income and is a junior or senior at our institution. On behalf of this  
student, \_\_\_\_\_, my staff and I recommend your  
consideration of this student for receipt of the Marilyn Miller Endowment Fund.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**Please mail or fax this form by October 31, January 31 or April 30 to:**

**PORTLAND IMPACT  
Marilyn Miller Educational Endowment Fund  
4707 SE Hawthorne Blvd.  
Portland, OR 97215  
FAX 503-988-6099**