

Spokane Tribe Education Department

P.O. Box 388 ♦ Wellpinit, WA 99040 ♦ Ph#: (509) 458-8005 ♦ FAX: (509) 458-8017

Dear Applicant,

Enclosed is your 2012-2013 application for a Tribal Scholarship for our Higher Education and Adult Vocational Training Programs. Please note the deadlines of **June 15th** for fall quarter/semester and **September 4th** for winter quarter and spring quarter/semester. NOTE: If you do not meet the June 15th deadline then you are automatically ineligible for a Tribal Scholarship until winter quarter/semester. If you do not meet the September 1st deadline then you will not be eligible for a scholarship until the following school year. AVT students must apply at least 30 days prior to the class start date, however applying earlier is encouraged.

Along with this Tribal Application, your Student Aid Report (SAR) from your 2011-2012 FAFSA (Free Application for Federal Student Aid), and Certificate of Indian Blood (or copy of your Tribal enrollment card) must be submitted by the June 15th deadline, or September 3rd for winter/spring. FAFSAs must be completed at www.fafsa.ed.gov. Students will need their 2011 income tax information, as well as parents' income tax information for students age 24 and younger with no dependent children. NOTE: If 2011 tax information is unavailable, 2010 tax information can be used as long as you revise your fafsa once 2010 information is available, if the numbers are different. First-time FAFSA-filers (and parents if applicable) will need to apply for a pin on the fafsa website, which will be used to electronically sign the form. A signature page can be printed, signed, and mailed instead, but signing with the pin expedites the process. It is encouraged that parents/guardians and students keep your pin in a safe location, as this pin will be used to sign the fafsa for the duration of your student career. Our Enrollment Officer, Vicki Raymond, can be contacted if a CIB is needed at (509)458-6523, or vickir@spokanetribe.com.

All other required documents listed on the application should be submitted as early as possible to complete your file. With the exception of the class schedule, any missing documents will result in your file not being processed and will delay your Tribal Scholarship. Because class schedules are not always known months in advance, the schedule can be submitted as soon as it is available and final.

A few suggestions to begin the outside scholarship search are: collegefund.org, fastweb.com, <http://hecb.wa.gov/Paying/index.asp>, <http://www.aigcs.org/08otherscholarship/scholarships.htm>, and thewashboard.org. I also recommend looking for scholarships available at the institution you will be attending. Many schools have general applications that can be filled out that will automatically put students in for hundreds of scholarships. One thing they have in common are early application deadlines.

A final reminder is to find out whether or not your school has additional paperwork required in the Financial Aid Office in order for you to receive your financial aid. For example, Spokane Community College and SFCC require a DATA SHEET in their Financial Aid Office from all students. The deadline to submit the Data Sheet or any documents is April 16, 2012 for Summer/fall quarter students. Failing to submit required documents on time to Financial Aid Offices results in delayed Tribal Funding. In some cases Tribal Scholarships can be held up for several months due to financial aid verification paperwork being submitted late by students.

With questions regarding the application process, don't hesitate to contact the Education Department at (509)458-8005.

Respectfully,

Chanel Ford,
Education Program Manager

Spokane Tribe Education Department

P.O. Box 388 Wellpinit, WA 99040 ♦ (509) 458-8000 ♦ FAX: (509) 458-8017

2012-2013 Scholarship Application Higher Education & Adult Vocational Training

ANNUAL PRIORITY DEADLINE: June 15, 2012

DEADLINE DATES: JUNE 15, 2012

This is the deadline for Fall Quarter or Fall Semester. Student Aid Report (SAR) from 2012-2013 FAFSA and CIB must be turned in with tribal application to be considered for funding.

SEPTEMBER 4, 2012

This is the deadline for Winter Quarter, Spring Quarter & Spring Semester. This includes all documents. **Please note that this is based on the availability of funds.**

AVT Students must apply **AT LEAST 30 DAYS** prior to class start-date.

PLEASE NOTE: All documents should be submitted as soon as possible.

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REQUIRED DOCUMENTS TO BE SUBMITTED BY THE STUDENT:

MUST BE SUBMITTED BY DEADLINE DATE:

- Spokane Tribal Application _____
- Copy of Student Aid Report from 2012-2013 FAFSA (this may take 6 weeks to receive) _____
- Copy of Tribal Enrollment Verification, CIB, or Enrollment Card (new students only) _____

MUST BE SUBMITTED TO COMPLETE FILE, AS EARLY AS POSSIBLE:

- Copy of High School Diploma, GED, or last College Transcript _____
- Copy of College Acceptance Letter (new students only) _____
- Personal letter outlining Educational goals (new students only) _____
- List of 2 outside scholarships applied for _____
- Copy of Class Registration/Schedule (must submit at the beginning of each quarter/semester) _____
- Student Agreement (enclosed) _____
- Internet/ Telephone Verification of Grade Access (Optional Agreement) (enclosed) _____

KEEP THIS PAGE FOR A CHECKLIST. IF ALL DOCUMENTS ARE NOT SUBMITTED WITH YOUR APPLICATION, YOUR FILE IS INCOMPLETE.

A NEW APPLICATION MUST BE FILLED OUT EACH YEAR

Please call (509) 458-8000 if you have any questions regarding the application or required documents.



SPOKANE TRIBE EDUCATION DEPARTMENT 2012-2013

P.O. Box 388 Wellpinit, WA 99040 ♦ (509) 458-8000 ♦ FAX: (509) 458-8017

Name: _____ **Date of Birth:** _____
Last First Middle Maiden

Address: _____ **Social Security #:** _____
City State Zip code **Telephone#:** (____) _____

Address: (while in school) _____
Street/Box City State Zip code

Email address: _____

Sex: M F **Veteran:** Yes No **If yes, dates of Service:** _____

Marital Status: Single Married Divorced Separated Widowed

No. of Dependents: _____ **Names and ages of Dependents:** _____

Tribal Affiliation: _____ **Enrollment #:** _____

Mother's Name: _____ **Father's Name:** _____

Address: _____ **Address:** _____

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EDUCATION

High School Diploma? Yes No **Name of High School:** _____

Type of High School: Public Private Tribal BIA **Date of graduation:** _____

GED? Yes No **Date of completion:** _____ **Location:** _____

A NEW APPLICATION MUST BE FILLED OUT EACH YEAR

List any College, University, or Training Facility previously attended and dates of attendance:



FUNDING PERIOD

Funding is being requested for 2012 – 2013: Full-time Part-time

Entire academic year Fall ONLY Winter ONLY Spring ONLY

Year in College: Fresh Soph Jr. Sr. Grad Vocational

Name of College/University/Training Facility: _____

Location: _____

Major/Minor Field of Study or Area of Interest:

1. _____ 2. _____

Degree Sought: AA/AAS BA/BS Masters Doctoral Certificate/License

Expected Graduation Date: _____

For Vocational, how many months is the program? _____



EMPLOYMENT

Are you currently employed? (Do not include Work-Study) Yes No

If you answered yes, are you employed: Full-time Part-time

What is your anticipated employment status during the school year?

Full-time Part-time Unemployed Unknown

Name of Employer: _____

STATEMENT OF EDUCATIONAL PURPOSE

I declare that I will use any funds I receive under the Higher Education or Adult Vocational Training Grant Program solely for expenses associated with attendance at:

Name of College or University or Vocational Institute

PRIVACY ACT

This information is provided to Public Law 93-579 (Privacy Act of 1974), December 31, 1974. Although furnishing personal information to this office is voluntary, failure to supply complete and accurate information may preclude the applicant from eligibility for assistance under this program.

This information is being collected to determine eligibility of individuals applying for services. This information will be used to produce statistical records required of the Office of Indian Education Programs. Response to this request is required to obtain a benefit.

I hereby certify that the above information on this form is true and correct to the best of my knowledge and consent to the release of this information to necessary agencies to complete my financial aid package. I request that any BIA grant awarded to me be mailed to me in care of the financial aid office of the institution. I will provide a copy of my grades or transcript to the Higher Education Office at the end of each academic term.

Student Signature

Date

RELEASE OF INFORMATION

Under the Federal Privacy Act of 1974, Federal Agencies cannot release your personal information without your authorization and the Spokane Tribal Education Program is subject to these restrictions. A release from students allows the Education Program to explore alternative sources of assistance that may aid the individual student. Your application and records are considered privileged information and will be kept confidential.

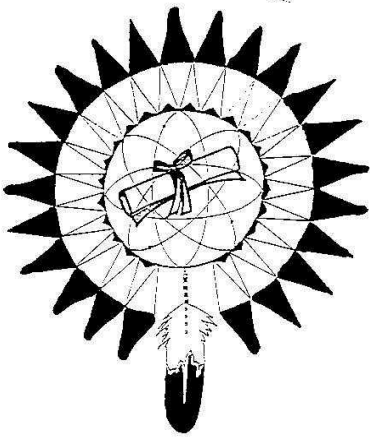
I have read and understand that the above statement regarding my Privacy Rights and the purposes for which information about me will be used by the Spokane Tribal Education Program Staff.

I authorize the release of information about myself and my educational background to the Spokane Tribal Education Program to help me secure financial assistance.

YES NO

Student Signature

Date



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STUDENT AGREEMENT

I agree to maintain a minimum GPA of 2.00 while carrying a minimum credit load of 12 credits. As a **part time or graduate student**, I agree to maintain a minimum **GPA of 2.00**.

_____ (initials)

I will make necessary reports regarding my progress and furnish any other information requested. Should I desire to change schools during the course of my study, I will notify the Education Specialist at least sixty (60) days in advance of such transfer. **I will also notify the Education Specialist of any intention to withdraw from school.**

_____ (initials)

I understand that if I withdraw from school, for any reason, before the end of the term (quarter or semester), I am to refund to the Spokane Tribal Education Department all monetary awards advanced to me during that term before I qualify for any further awards.

_____ (initials)

I understand that Education grants are to cover any of my education expenses after all other grants and scholarships won are applied first. If I receive outside funding sources such as delayed financial aid or scholarships after Tribal funding has been disbursed, I agree to reimburse the Spokane Tribe for the expenses paid in my behalf for tuition, books and other fees.

_____ (initials)

I further agree that should it become necessary for the Spokane Tribe to collect any refunds from me, I authorize the Spokane Tribe and the superintendent of the Spokane Agency to withhold any trust income I may have in the future or take any means necessary for collection, until full credit has been received.

_____ (initials)

I fully understand that each school year, I am required to complete a new student agreement in order to complete my education file.

_____ (initials)

I am signing in agreement that I have received the new 2012-2013 Higher Education/AVT application from the Education Department and am fully aware of the **June 15th cut off** date to be considered for **Fall 2012 funding**. I am fully aware that if I do not submit this application before the required deadline no exceptions will be made.

_____ (initials)

I have read the Spokane Tribe of Indians Education Department Policy and Procedures, and agree to abide by all policies stated to remain eligible for Higher Education funding.

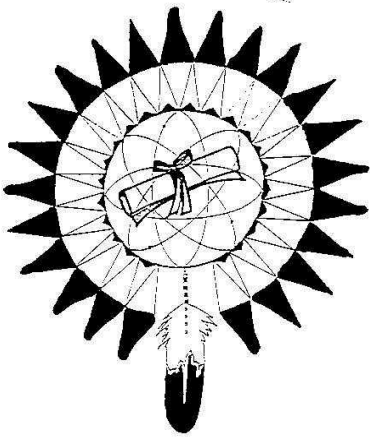
_____ (initials)

Student Signature

Date

Education Program Manager

Date



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INTERNET / TELEPHONE VERIFICATION OF GRADE ACCESS OPTIONAL AGREEMENT

I authorize the Spokane Tribal Education Department personnel to access and print my final grades and schedule information via the internet or telephone verification, for the exclusive purpose of confirming grade/transcript requirements and enrolled status for continued educational funding. I authorize access to my Financial Aid information in cases where my Financial Aid awarded needs to be verified.

I understand this authorization can be revoked, in writing, at any point in time.

With this authorization, I will provide the procedure as to how to obtain access to my Internet account as instructed by my school (student identification number and password).

I also understand that by signing below I will be responsible for notifying the Education Department personnel as to when the authorized information is available.

Student ID# _____

Password/PIN _____

Website _____

Print your full name

Signature

Date