



"Te-Tu-Koo" Resources

●P.O. Box 470 Pawnee, Oklahoma 74058● Phone: 918-762-3227 ●Fax: 918-762-3662●
scholarship@pawneenation.org

PAWNEE NATION HIGHER EDUCATION SCHOLARSHIP APPLICATION

The purpose of the Higher Education Scholarship Program is to provide supplemental financial assistance to enrolled members of the Pawnee Tribe that are pursuing an education at an accredited institution of higher learning. Applicants must satisfy all Federal Bureau of Indian Affairs requirements as specified in the application packet in order to determine eligibility.

ELIGIBILITY

1. Be a member of the Pawnee Nation of Oklahoma.
2. Be enrolled in an accredited institution of higher education. Vo-tech students must enrolled fulltime in a degree seeking or certificate seeking program and are subject to approval by the Pawnee Nation Higher Education Scholarship committee.
3. Demonstrate a financial need as determined by the eligible institution's financial aid office according to the U.S. Department of Education's formula.
4. Must apply for all available financial aid (www.fafsa.gov).
5. Completed application must be submitted by the deadline.

REQUIRED DOCUMENTS

1. Completed application form-
 - a. Essay of educational needs/goals
 - b. Award Agreement
 - c. Financial Needs Analysis (FNA) – must complete FAFSA before this can be submitted.
2. Certificate Degree of Indian Blood (CDIB).
3. Letter of Acceptance from an eligible institution.
4. High school transcript or a General Equivalency Diploma (GED).
5. Transcripts from previous term of attendance.
6. *Class schedule verifying 12 hour enrollment or fulltime status
**Pawnee Nation College & Pawnee Nation College/Bacone students only require 9 hours enrollment*

ALL APPLICANTS

Submission of applications and documents will be accepted via mail, email, fax, and hand delivery but does not certify eligibility of scholarship. All completed and on-time applicants are reviewed via student number by the Higher Education Scholarship committee. **All awarded and non-awarded applicants will be notified via email transmission with complete description and terms of the award, and description of appeals process for those not selected.**

Part-time, summer enrollment, and graduate funding are contingent upon available funds and may be subject to further review. All prospective higher education students that are Pawnee tribal members have the right to utilize the division for assistance with resources while attending school even if they are not awarded the scholarship. Instructions for each item are described on checklist of application.

DEADLINES

FALL SEMESTER JUNE 1●SPRING SEMESTER NOVEMBER 1●SUMMER SEMESTER APRIL 1

Email: scholarships@pawneenation.org

Mailing Address: Attention- Higher Education P.O. Box 470, Pawnee, OK 74058

Physical Address: 657 Harrison Street (3rd floor)



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ACADEMIC YEAR 20__-20__

Please fill in every line applicable and circle where necessary. Blank/voided answers may be cause for denial of consideration.

Name _____
FIRST LAST MI INITIAL

Social Security # _____ Birthdate _____

Marital status: **Single** OR **Married** OR **Separated** OR **Divorced** # of dependents (IF ANY) _____

Pawnee Nation Enrollment # _____ State of Residency _____

Address: _____
STREET CITY STATE ZIP CODE

Email Address _____ Telephone _____

Preferred method of communication **PHONE** OR **MAIL** OR **EMAIL**

STUDENT STATUS INFORMATION

Which term will you be attending? **Entire Academic Year** / **Spring Only** / **Fall Only** / **Summer**

What will your enrollment status be? **Full Time** _____ OR **Part Time** _____
#hours #hours

Classification: **FRESHMAN** **SOPHOMORE** **JUNIOR** **SENIOR** **GRADUATE**

I will live: **ON CAMPUS** OR **OFF CAMPUS** OR **WITH PARENTS**

SCHOOL INFORMATION

Name of Institution _____

Address of Institution _____
STREET CITY STATE ZIP

MAJOR _____ Expected Graduation Date _____

Have you previously been awarded the Pawnee Nation scholarship? _____ If yes, list year(s) and semester: _____ #of semesters completed during scholarship period: _____

| |
|--|
| <p align="center">477 PURPOSES</p> <p align="center"><i>Do not leave blank. If living with family please guesstimate your income.</i></p> <p>Monthly Household Income while attending school \$ _____ Last 6 Months \$ _____ (Please do not count school funding – loans, Pell grant, work study- as income.)</p> <p>Veteran? YES NO If male, are you registered for selective service? YES NO</p> <p>Education at time of enrollment: HS graduate GED Some College Degree Vo-tech</p> |
|--|

Statement of Education Intent: I understand that if money is awarded I will only use these funds for the expenses connected with attendance of the institution listed above. I further certify that all information I have submitted is true and correct to the best of my knowledge.

Signature of Student _____ Date _____



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STATEMENT OF PRIVACY

Required Submission of Student Information

The Pawnee Nation of Oklahoma, pursuant to P.L. 93-638, has contracted the Higher Education Scholarship Program. The Privacy Act of 1974 requires that each Federal agency that maintains a system of information on individuals to inform those individuals as to:

1. The authority (whether granted by statute or by executive order of the President), which authorizes the solicitation of the information and whether disclosure of such information is mandatory or voluntary;
2. The principal purpose(s) for which the information is intended to be used;
3. The routine uses which may be made of the information as published pursuant to paragraph (4)(D) of this subsection;
4. And the effects on applicant, if any, if not providing all or any part of the requested information.

The Pawnee Nation Higher Education Scholarship program operates under the general authority of 24 USC Chapter 12, 42 Statute 208 P.L. 67-85, with specific legislation contained in 25 USC, subchapter E, Part 32, "Administration of Educational Loans, Grants and Other Assistance for Higher Education."

The applicant understands that the intent of collecting and maintaining this data is for determining eligibility and to provide a means of producing statistical records. Failure on the part of the applicant to provide the requested information will preclude the applicant from eligibility in obtaining higher education assistance under this program.

The administration of this program requires certain information from the applicant. The forms included in this packet solicit the required information. This information may be made available to authorized organizations or individuals.

I have read the statement on privacy listed above. I hereby provide the required information and authorize the use of such information.

I hereby give permission to release any and all of the following information to the Pawnee Nation or Education Division staff member:

- Financial aid awards, application data, disbursements, and/or eligibility
- Billing statements, charges, credits, payments, and/or past due amounts
- GPA/grades, demographic, registration, student ID number, enrollment information, and/or academic progress status
- Access to student records maintained by the Registration Office and Financial Office, including all of the above examples

Student Signature _____

DATE _____



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AWARD AGREEMENT

The terms below must reviewed carefully by you as the student to certify your responsibility as a recipient of the Pawnee Nation Scholarship Program. Each term must be initialed.

Initials

- _____ I agree to register for 12 credit hours and maintain a minimum 2.0 GPA.
- _____ I agree to notify the Education Division immediately if I fall under the required hours/GPA.
- _____ I understand I will be placed on probation the following semester I return if one or both of these violations occur.
- _____ I understand if these violations occur during the probation period I will be suspended from the program until I can attend one semester at full time status and required GPA while being funded through another source.
- _____ I will arrange for an official transcript to be delivered to the Pawnee Nation Education Division at the end of each semester.
- _____ I agree to submit grades for each requested semester to verify completion.
- _____ I certify that I am not enrolled in another tribe or applying for or receiving funds from another tribe's BIE scholarship fund.
- _____ I understand that if I fail to notify the Education Division of withdrawing from classes or school before completing the semester, I will be subject to reimbursement of funds and termination of the program.
- _____ I understand there is a 10 semester limit for award of this scholarship.
- _____ FALL RECIPIENTS: I understand that if I am awarded in the fall semester my status will be a continuing student. I am responsible for enrolling for the spring in a timely manner and submitting the Letter of Intent by November 1 with my schedule. I will send my grades when they become available understanding my spring award will not be sent until my grades are in.
- _____ GRADUATING STUDENTS: I agree to send my final transcript and copy of my diploma to the Education Division upon graduation.

I, _____ ACCEPT / DECLINE my approved award of \$ _____ for
NAME OF STUDENT

the _____, 20____ and I agree to the above conditions.
SEMESTER

Signature

Date



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FINANCIAL NEEDS ANALYSIS
 Academic Year 20__-20__

Part 1 – To completed by the student

Name _____ SS# _____
 Address _____ Telephone# _____

Marital Status **SINGLE MARRIED DIVORCED** Dependents _____ Tribal Roll # _____
 Student Classification **FRESHMAN SOPHOMORE JUNIOR SENIOR GRADUATE**
 Type of School **JUNIOR COLLEGE PRIVATE SECRETARIAN TRADE COLLEGE/UNIVERSITY TRIBAL BIA**
 Gender **MALE FEMALE** Status **NEW STUDENT FORMER TRANSFER** # of hours enrolled _____
 Major _____ Minor (if applicable) _____
 Applied for: **PELL GRANT STATE GRANT TUITION WAIVER WORK STUDY SEOG NDSI GSL OSL**

Part 2 – To completed by the Financial Aid Officer

 Student signature Date

STUDENT BUDGET

Academic Year 20__-20__

Please check for applicable:

Semester only _____ Academic year _____

| SCHOOL EXPENSES | STUDENT RESOURCES | AWARDS |
|----------------------|---------------------------|---|
| Tuition | Family Contribution | Pell |
| Fees | Student Contribution | SEOG |
| Books | Veterans Benefits | Work Study |
| Supplies | Social Security | NDSL |
| Room & Board | Vocational Rehab | GSL |
| Dependency Allowance | AFDC | Tuition Waiver |
| Transportation | Fellowships | State Tuition Grant |
| Personal Expenses | IHS Grants | Other (List) |
| Other (List) | State Indian Scholarships | |
| | Other (List) | |
| | | |
| | | <i>*only include if student has accepted loan</i> |

School Expenses TOTAL \$ _____ Student Resources TOTAL \$ _____ Awards TOTAL \$ _____

TOTAL Student Expense – Total Resources = \$ _____ TOTAL FINANCIAL NEED

TOTAL Financial Need – Total Awards = \$ _____ UNMET NEED

This student assessment is consistent with standard packages prepared for students who are not eligible for BIA education grant.

PLEASE MAIL ORIGINAL FORM to address listed on this form ATTENTION: Higher Education.

FINANCIAL AID OFFICER

Name _____
 Signature _____
 Email Address _____
 Date _____

INSTITUTION: This address will be used to mail disbursements

School Name _____
 Address _____
 Phone # _____



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For your records, please use this section as a guide to ensure you submit complete scholarship application.
Incomplete submissions will not be considered.

Student status/Terms

- New** Freshman, 1st time applicants
- Returning** Applicants who have received the scholarship before and have left school but returned
- Continuing** Applicants who are selected in the fall for scholarship; this category of students are considered priority for spring and will be the first to be awarded.
- Academic Year** When a student enrolls for both fall & spring semesters; these students are considered continuing and are subject to priority conditions
- *FAFSA** To be considered for Free Application for Federal Aid (FAFSA) award year, you can complete a Free Application for Federal Student Aid (FAFSA) between January 1 and midnight Central Time, June 30. This must be completed before the Financial Needs Analysis (FNA form).

Part 1 Application Instructions

| √ | FORM | WHO | WHEN |
|---|---|--|--|
| | Completed application <i>Award agreement Privacy Statement</i> | All students, New students, Returning students, Continuing students who miss LOI deadline | Once per academic year or semester, At the time of application |
| | Essay | New students, Returning students, If students changes plans (ie- goals, major, school) | At the time of application |
| | *Financial Needs Analysis | ALL students | Once per application |
| | Letter of Intent <i>Forms will be emailed to students beginning in October & available on website</i> | Continuing Students | November 1 <i>Must include spring schedule!</i> |

Part 2 Required Documents Instructions

| √ | DOCUMENT | WHO | WHEN |
|---|---|--|---|
| | Proof of enrollment <i>Tribal IDs Cards</i> | New students, Returning students | Initial application |
| | Letter of Admission | New students, Returning Students | At the time of application; When switching schools |
| | Official College/University Transcript | Returning students, Continuing students | At the time of application; End of spring semester |
| | Official HS Transcript/GED | New students | Initial application |
| | Semester grades | Continuing students | November 1 |
| | Class schedule | All Students | At the time of application |

FOR STUDENT USE ONLY