



“Te-Tu-Koo” Resources

•P.O. Box 470 Pawnee, Oklahoma 74058•Phone: (918)762-3227•Fax: (918)762-3662•
dbattese@pawneenation.org

PAWNEE NATION GRADUATE SCHOLARSHIP APPLICATION

The purpose of the Higher Education Scholarship Program is to provide financial assistance to enrolled members of the Pawnee Tribe that have a Financial Need and are pursuing an education at an accredited institution of higher learning. Applicants must satisfy all Eligibility requirements and submit all required documents 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 enroll fulltime in a degree seeking or certificate seeking program and are subject to approval by the Pawnee Nation Higher Education Scholarship committee.
3. Must apply for all available financial aid (www.fafsa.gov) and 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. Completed application must be submitted by the deadline.

Required Documents

1. Completed application form-
 - a. Resume
 - b. Essay that addresses the following information:
 - i. Student’s Educational Needs
 - ii. Research Areas of Interest
 - iii. Career/Professional Goals
 - c. Award Agreement
 - d. Financial Needs Analysis (FNA) – must complete FAFSA before this can be submitted.
2. Certificate Degree of Indian Blood (CDIB)
3. Letter of Acceptance into a Graduate Program from an Eligible institution; Accredited and Non-Profit Organization.
4. Official Transcripts from previous term of attendance.
5. *Class schedule for semester of application to verify enrollment.
6. ***Male Scholarship Recipients Must Provide Documentation of Selective Service Registration.
(<https://www.sss.gov/Home/Verification>)

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 committee. **All awarded and non-awarded applicants will be notified via email transmission with complete description and terms of the award, and description of appeal process for those not selected.**

Graduate Funding is 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 items are described on checklist of application.

Deadlines

2018 FALL SEMESTER JUNE 4, 2018 • 2019 SPRING SEMESTER NOVEMBER 5, 2018

Email: dbattese@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

Middle Initial

Social Security #: _____ Birthday: _____

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

Undergrad Degree: _____

Year Undergrad Completed: _____

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

SCHOOL INFORMATION

Name of Institution: _____

Street

City

State

Zip Code

Address of Institution: _____

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: _____

Please list the name under which you received previous funding (if your name has changed): _____

477 PURPOSES

Do Not leave blank. If living with family please guesstimate your income.

Monthly Household income while attending school \$ _____ Last 6 Months \$ _____

(Please do not count school funding – Loans, Pell Grant, Work Study – as income.)

Veteran? **YES NO** If male, are you registered for selective service? **YES NO**

Education at Time of Enrollment: **HS Graduate GED Some College Degree Vo-Tech**

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, 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 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 Pawnee Nation 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 be 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 that it is solely my responsibility to communicate with the Pawnee Nation Education Division Director during the semester of funding. My check in for contact will be during the week of my midterms.

_____ I agree that no information will be given to outside sources, no 3rd party communication.

_____ I agree to register for Full Time hours and maintain a minimum 3.0 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 the semester.

_____ 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.

_____ **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 scholarship in a timely manner and will submit the Letter of Intent by November 5th with my schedule. I will send my Official Transcript when it becomes available, understanding that my spring award will Not be sent until my Transcript is in.

_____ **GRADUATING STUDENTS:** I agree to send my final transcript and a copy of my diploma to the Education Division upon graduation.

I, _____ ACCEPT/DECLINE my approved award of \$_____ for
the _____, 20____ and I agree to the above conditions.

Signature

Date



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FINANCIAL NEEDS ANALYSIS
 Academic Year 20____-20____

Part 1 – To be completed by the student

Name: _____ SS#: _____
 Address: _____ Telephone#: _____
 Marital Status: **SINGLE MARRIED DIVORCED** Dependents: _____ Tribal Roll #: _____
 Undergrad Degree: _____ Year Completed: _____
 School Type: **Junior College Private Sectarian 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
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STUDENT BUDGET

Academic Year 20__-20__
 Please check for applicable:
 Semester only ____ Academic year ____

SCHOOL EXPENSES	STUDENT RESOURCES	AWARDS
Tuition	Student Contribution	Pell
Fees	Veterans Benefits	SEOG
Books	Social Security	Work Study
Supplies	Vocational Rehab	NDSL
Room & Board	AFDC	GSL
Dependency Allowance	Fellowships	Tuition Waiver
Transportation	IHS Grants	State Tuition Grant
Personal Expenses	State Indian Scholarships	Other (List)
Other (List)	Other (List)	

**only include if student has accepted loan*

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 OF INSTITUTION: This address will be used to mail disbursements

Name: _____ School Name: _____
 Signature: _____ Address: _____
 Email Address: _____
 Date: _____ 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

<u>New</u>	1 st time applicants
<u>Returning</u>	Applicants who have received the undergraduate scholarship before and have left school but returned
<u>Continuing</u>	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.
<u>Academic Year</u>	When a student enrolls for both fall & spring semesters; these students are considered continuing and are subject to priority conditions
<u>*FAFSA</u>	To be considered for Free Application for Federal Aid (FAFSA) award year, you can complete a Free Application for Federal Student Aid (FAFSA) beginning October 1 st , ending June 30 th . This must be completed before the Financial Needs Analysis (FNA form).

Part 1 Application Instructions

√	FORM	WHO	WHEN
	<u>Completed application</u> <i>Award agreement Privacy Statement</i>	<u>New students,</u> <u>Returning students,</u> <u>Continuing students who miss LOI deadline</u>	Once per academic year or semester. At the time of application submission.
	<u>Essay</u>	<u>New students, Returning students:</u> if student’s changes plans (ie- goals, major, school)	At the time of Application Submission
	<u>*Financial Needs Analysis</u>	ALL students	Once per application
	<u>Letter of Intent</u> <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
	<u>Proof of enrollment</u> <i>Tribal IDs Cards</i>	New students, Returning students	Initial application
	<u>Letter of Admission</u>	New students, Returning Students	At the time of application; When switching schools
	<u>Official College/University Transcript</u>	Returning students, Continuing students	At the time of application; End of spring semester
	<u>Official HS Transcript/GED</u>	New students	Initial application
	<u>Class schedule</u>	All Students	At the time of application
	<u>Selective Service Verification</u>	Male Recipients who are not/did not enlist in Military Services.	At the time of application

FOR STUDENT USE ONLY