

NULATO TRIBAL COUNCIL

P.O. Box 65049
Nulato, Alaska 99765
(907) 898-2339

Name: _____

RE: HIGHER EDUCATION APPLICATION REQUIREMENTS FOR NEW STUDENTS (Check List) Continuing students need only comply with #'s 1, 2, and 3.

The items CHECKED below have been received by our office. Please submit the items NOT CHECKED as soon as possible.

1. Submit NTC Higher Education Grant Application to the Nulato Tribal Office before the deadline date.

2. Apply for Pell Grant.

Use the Financial Aid Form that your college is using. In four to six weeks you will receive a "Student Aid Report" (SAR). BE SURE TO SIGN AND SUBMIT SAR TO THE COLLEGE Financial Aid Office (FAO). After FAO receives your SAR, a budget forecast will be sent to the Nulato Tribal Office. From this budget forecast we will determine your grant amount.

3. Official Transcripts.

Copy of high school transcripts with date of graduation. OR if GED received, we will need transcripts from last high school attended plus GED scores. Continuing students need to submit grades to the Nulato Tribal Council after each term/semester.

4. Copy of Letter of Acceptance from the College/University.

5. Letter of Educational Goals

6. Two (2) Letters of Recommendation

7. Verification of Alaska Native Ancestry, which may be obtained from the Nulato Tribal Office. P.O. Box 65049, Nulato, Alaska 99765.

Send applications directly to the above Nulato Tribal Council Address.

NULATO TRIBAL COUNCIL
Higher Education Grant Program
POLICIES AND PROCEDURES

IMPORTANT!!! AS THE NULATO TRIBAL COUNCIL'S HIGHER EDUCATION GRANT FUNDS ARE SUPPLEMENTAL IN NATURE, APPLICANTS ARE REQUIRED TO APPLY FOR ALL AVAILABLE STATE, FEDERAL, AND PRIVATE FINANCIAL AID; AND ARE REQUIRED TO UTILIZE ALL AVAILABLE STUDENT AND FAMILY RESOURCES BEFORE FUNDING FROM THE NULATO TRIBAL COUNCIL CAN BE CONSIDERED.

1. PURPOSE

The purpose of the Nulato Tribal Council's Higher Education Grant Program is to FINANCIALLY ASSIST eligible Nulato Tribal Members who are enrolled to an accredited college or university, and who can demonstrate FINANCIAL NEED.

2. ELIGIBILITY

A. To be eligible for a grant, an applicant must be:

- (1) Enrolled to the Nulato Tribe.
- (2) In FINANCIAL NEED AS DETERMINED BY THE COLLEGE OR UNIVERSITY OFFICIAL AFTER THE FOLLOWING SOURCES OF FUNDING ARE UTILIZED.

Grants and scholarships from colleges, private and foundation grants and scholarships, state and federal sources.

Personal and/or family contributions.

3. DETERMINATION OF ELIGIBILITY

An applicant's eligibility shall be determined by the Nulato Tribal Council.

4. STANDARDS FOR GRANT APPLICATION AND FUNDING

- A. All applicants must have complete grant application packets for the school year.
- B. Continuing undergraduate applicants who meet the academic requirements will be funded first, with priority given to Seniors and Juniors.
- C. Graduate students may be funded if funds are available, and if all other resources have been exhausted.

5. APPLICATION DEADLINES

The grant application and all other required items must be in the Nulato Tribal Council office **no later than**:

APRIL 30 for students planning to begin the school year at the beginning of Fall term.

NOVEMBER 15 for students beginning school in the Spring Semester, or Winter or Spring quarter. These applications will be considered, pending availability of funds.

FEBRUARY 15 for students wishing to attend summer school only (these applications will need to be accompanied by a written justification for the need of summer school.)

6. ACADEMIC REQUIREMENTS AND PROGRESS EVALUATIONS

- A. For continuation of funding under the Nulato Tribal Council's Education Grant Program, students must maintain a minimum of 2.0 GPA (grade point average) while earning no less than an average of 12 credit hours per term.
- B. All students who have been funded by the Nulato Tribal Council for an excess of two (2) years will have their college transcripts reviewed for purposes of evaluating the student's progress and to determine if the student is making sincere effort to complete his/her educational goals.
- C. Part-time students will be funded only for tuition and books.

7. NOTIFICATIONS AND PAYMENT OF AWARDS

- A. As soon as it is practically possible, given the circumstances associated with the funding cycle, the Nulato Tribal Council will notify applicants in writing as to the approval or disapproval of their applications. Notifications to applicants of approved applications will specify the amount of individual awards.
- B. Payments/awards will be sent to the FINANCIAL AID OFFICE of the institution that the student will be attending. Such awards will be in the student's name, in care of the institution.

NULATO TRIBAL COUNCIL
SCHOOL YEAR 20____-____

1. Last Name	First Name	MI	2. Social Security No.	3. Date of Birth Mo.____ Dy.____ Yr.____	
4. Permanent Mailing Address	City or Town	State	Zip Code	4a. Permanent Telephone No.	
5. Current Mailing Address	City or Town	State	Zip Code	5a. Current Telephone No.	
6. Marital Status Single <input type="checkbox"/> Married <input type="checkbox"/>	7. Number of Ages of Dependents		8. Sex: M <input type="checkbox"/> F <input type="checkbox"/>	9. Are you a Veteran? Yes <input type="checkbox"/> No <input type="checkbox"/>	
10. Regional Native Corporation Enrolled to:			11. Are you enrolled to the Nulato Tribe? Yes <input type="checkbox"/> No <input type="checkbox"/>		
12. High School graduated from: Name _____ Address _____ Graduation Date _____		12a. Type of High School Public <input type="checkbox"/> BIA <input type="checkbox"/> Private/Mission <input type="checkbox"/> Date _____		12b. GED <input type="checkbox"/>	
13. College(s) Attended:	Name(s)	Address(s)	Date(s) Attended	Credit(s) Earned	
14. Academic Year for which this application applies (check one): UNDERGRADUATE: Freshman <input type="checkbox"/> Sophomore <input type="checkbox"/> Junior <input type="checkbox"/> Senior <input type="checkbox"/> 5 th <input type="checkbox"/> or GRADUATE YEAR: 1st <input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <input type="checkbox"/> 4th <input type="checkbox"/>					
15. Name and Address of SCHOOL YOU WILL BE ATTENDING: Name: _____ Address: _____					
16. Type of School (listed in #15): Junior College <input type="checkbox"/> Private/Sectarian <input type="checkbox"/> University/4-Year College <input type="checkbox"/>			17. School Calendar Year: Semester <input type="checkbox"/> Trimester <input type="checkbox"/> Quarter <input type="checkbox"/>		
18. Major COURSE of study (please specify):		19. DEGREE being sought (Associate <input type="checkbox"/> , BA <input type="checkbox"/> , BS <input type="checkbox"/> , MA <input type="checkbox"/> , etc.)		20. Estimated date of graduation: Month <input type="checkbox"/> Year <input type="checkbox"/>	
21. While in school, will you live (check one): With Family <input type="checkbox"/> On Campus <input type="checkbox"/> Off Campus <input type="checkbox"/>		22. Student Status during Grant/ Scholarship period: Full-time <input type="checkbox"/> Part-time <input type="checkbox"/>		23. Date of attendance for which this application is valid: From: Month _____ Year _____ To: Month _____ Year _____	
24. Tuition \$ _____	STUDENT \$ _____	SCHOLARSHIPS: \$ _____			
Fees \$ _____	PARENT or SPOUSE \$ _____	College: \$ _____			
Books & Supplies \$ _____	FEDERAL AND	Other (specify): \$ _____			
Room/Rent \$ _____	CAMPUS BASED AID:				
Board \$ _____	Pell \$ _____				
Personal \$ _____	VA \$ _____				
TOTAL COSTS \$ _____	Other (specify): _____	MISC./OTHER (specify):			
		\$ _____	\$ _____	\$ _____	\$ _____
		\$ _____	\$ _____	\$ _____	\$ _____

25. My signature below certifies that I have read, understand, and agree to the conditions and authorizations stated in the "Applicant's Certification," "Privacy Act Notice," and "Additional Required Items," sections printed on the reversed side of this application.

Signed: _____ Date: _____

APPLICANT CERTIFICATION

I certify that the information contained in this application is true, complete and correct to the best of my knowledge and belief and is made in good faith. I, further certify that I will use any funds that I might receive pursuant to this application solely for the expenses related to attendance at the educational institution named on this form for the academic period covered by this application. I understand that I am responsible for repaying any funds I receive which cannot reasonable be attributed to meeting my educational expenses at the educational institution named on this form.

PRIVACY ACT NOTICE

Public Law 93-579: The Privacy Act of 1974 (5 USC 55a) maintaining records about people to inform each person, from whom information is obtained, about the nature and purpose of the records. This includes Higher Education records maintained by the Nulato Tribal Council.

The purpose of the forms and questions asked of you is to enable us to organize, staff and provide Higher Education services to the people we serve. By giving the information we requested of you, we will be able to carry out our responsibilities to you more effectively and efficiently.

Information provided by you is held in confidence, and is only made available to other employees and other related agencies who have a need to know in the performance of their duties. In addition, certain data may be provided to local, state, federal, and other health and welfare facilities and agencies on a need-to-know basis for continuation of services, to provide for a proper evaluation of your case file.

Data may also be made available to approved accreditation agencies and performance standard review organization for evaluation of our system; to authorized research personnel with an approved research protocol when no personal identification data is included, and to the Department of Justice or other law enforcement agencies.

ADDITIONAL REQUIRED ITEMS

In addition to completing this application, you are required to submit additional items and information in order for you to have a completed file. **NO REVIEW OF YOUR APPLICATION IN REGARDS TO DETERMINING GRANT OR SCHOLARSHIP AWARDS CAN BE DONE UNTIL YOUR FILE IS COMPLETE.**

By signing this application you are agreeing to submit, or have submitted, all items and information necessary to have a complete – and reviewable – file.

Nulato Tribal Council
P.O. Box 65049
Nulato, AK 99765

Date:

To Whom It May Concern:

This is my authorization to you, for the release of my grade. Please forward an official transcript to **Nulato Tribal Council**, at the above address.

PRINTED NAME

SIGNATURE

SOCIAL SECURITY NUMBER

DATE OF BIRTH

HIGH SCHOOL: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

ADDITIONAL INFORMATION:

Last Year Attended: _____

Maiden or Other name Used While Attending

School: _____

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