# San Carlos Apache Tribe Education Department

# **Higher Education Program**

P.O. Box 0 San Carlos, AZ 85550

Phone: (928) 475-2336 Fax: (928) 475-2507

Dear San Carlos Apache Tribe Member,

The Higher Education serves eligible San Carlos Apache Tribal Members and provides them the opportunity to complete their educational goals beyond high school. Grants are made available for students who are enrolled members of the SCAT and are accepted for enrollment to an accredited college or university and who have established financial need.

Good luck with your studies,

**Executive Director Flora Talas** 

### Higher Education Check List: Are you a...

**First Time Applicant** – First time applying to the Higher Education Program or denied and reapplying again.

**Lapsed Applicant** – applicant who was a part of the Higher Education Program but dropped or left the program 3 or more years ago.

- o Tribal Higher Education Program Application/ Policy Agreement
- o Current Certificate of Indian Blood Copy Not Accepted
- o Official High School Transcripts/GED Certificate with Scores
  - o Official College/University Transcripts (If applicable)
- Free Application for Federal Student Aid Copy of Student Aid Report, obtained from fafsa.ed.gov
- o Admission Letter of Acceptance
- o Class Schedule
- o Education Course Plan
- Higher Education Financial Needs Analysis (FNA) (This form is submitted by the student to their College/University Financial Aid Office to complete.)
- Dorm/Apartment Lease Agreement (Only for SCAT who have a permanent address on the SCAT Reservation and are moving closer to their college/university.)

**Reapplying Applicant** – applicant who was currently awarded this past semester(s). \*Reapplying Transfer Applicant – applicant who were currently awarded this past semester(s) and is transferring to another college/university.

- o Tribal Higher Education Grant Application/Policy Agreement Updated
- Official Transcripts with Posted Semester Grades
  - Unofficial due as soon as available
- o Free Application for Federal Student Aid Copy of Student Aid Report
- Class Schedule
- Education Course Plan Updated
- o Higher Education Financial Needs Analysis Updated
- Dorm/Apartment Lease Agreement Updated (Only for SCAT who have a permanent address on the SCAT Reservation and are moving closer to their college/university)
- \*Letter of intent for reason of Transfer (For Transfer applicants ONLY)



# **Alexis Salter**

**Higher Education Manager** 

alexis.salter@ed.scat-nsn.gov

## **Deadline Dates:**

#### June 1

Fall Semester

#### November 1

Spring Semester

#### **Important Announcement**

As a Post-Secondary Student: You are responsible to ensure that **all required documents** are **on file** and **completed** with the Higher Education Program.

Any misrepresentation or falsification, including failure to submit required documents as listed on Check List is cause for cancellation/denial of San Carlos Apache Tribal Higher Education Program Award.

All completed applications are reviewed on first come, first served basis.

It is the applicant's responsibility to follow up on their application and documents submitted to SCAT Higher Education Program.

It is not the responsibility of the Higher Education Program to submit FNA on the applicant's behalf or follow up with them, nor are they required to notify student of their pending documents.

Page 1 of 4

# **Applicant Information**

	of the Job Placement & Training Prog - Month/Date Start:	gram? End:
	of the Higher Education Program?  - Month/Date  _ Start:	End:
Contact Information		
irst Name:	Last Name:	SSN:
		District:
Permanent Mailing Address:_		
	P.O. Box/Apt. # Street, City, State, Zip)	
Mailing Address while at Coll If Different than above)	ege/University:	City, State, Zip)
mail Address:	Student's School Email	Address:
	Personal I	Data
Narital Status:	Spouse Name:	No. of Dependent(s):
ather's Name:		Tribal Affiliation:
(First Name)  **Nother's Name:	(Last Name)	Tribal Affiliation:
ame of College/University	you are attending:	ion & Goals
	-	
College/University's Mailing	Address:	
College/University's Mailing A	Address: Freshmen Sophom	nore Junior Senior
College/University's Mailing A Year in College/University:  Degree Goal: Associa	Address: Freshmen Sophomate Degree Bachelor's Degree	nore Junior Senior e Master's Degree PhD/Doctorate's Degree
College/University's Mailing A Year in College/University:  Degree Goal: Association	Address: Freshmen Sophomate Degree Bachelor's Degree	nore Junior Senior e Master's Degree PhD/Doctorate's Degree
College/University's Mailing A Year in College/University:  Degree Goal: Association Proposed Major: Housing arrangements while	Address: Freshmen Sophomate Degree Bachelor's Degree	nore Junior Senior e Master's Degree PhD/Doctorate's Degree
College/University's Mailing A Year in College/University:  Degree Goal: Associate Proposed Major: Housing arrangements while Dormitory A	Address: Freshmen Sophomete Degree Bachelor's Degree Minor:	nore
College/University's Mailing A Year in College/University:  Degree Goal: Association Proposed Major: Housing arrangements while	Address: Freshmen Sophom  ste Degree Bachelor's Degree  Minor:  attending school: Apartment Rental Home Owner  Educational History – Please	nore
College/University's Mailing A Year in College/University:  Degree Goal: Associate Proposed Major: Housing arrangements while Dormitory A	Address: Freshmen Sophomete Degree Bachelor's Degree Minor:	nore
College/University's Mailing A Year in College/University:  Degree Goal: Associate Proposed Major: Housing arrangements while Dormitory A Name of College/Univ.	Address:	nore Junior Senior  Master's Degree PhD/Doctorate's Degree  Graduation Date:  With Parents Other:  List Most Current to Past Date of Attendance Credits Earned
College/University's Mailing A Year in College/University:  Degree Goal: Associate Proposed Major: Housing arrangements while Dormitory A Name of College/Univ.  I received my: High	Address: Freshmen Sophomete Degree Bachelor's Degree Minor:	nore Junior Senior  Master's Degree PhD/Doctorate's Degree  Graduation Date:  With Parents Other:  List Most Current to Past Date of Attendance Credits Earned
College/University's Mailing A Year in College/University:  Degree Goal: Associate Proposed Major:  Housing arrangements while Dormitory A Name of College/Univ.  I received my: High Hame of High School:	Address:	more Junior Senior  Master's Degree PhD/Doctorate's Degree  Graduation Date:  With Parents Other:  List Most Current to Past Date of Attendance Credits Earned  ficate Date of Graduation:
College/University's Mailing A Year in College/University:  Degree Goal: Associate Proposed Major: Housing arrangements while Dormitory A Name of College/Univ.  I received my: High Name of High School:	Address:	more Junior Senior  Master's Degree PhD/Doctorate's Degree  Graduation Date:  With Parents Other:  List Most Current to Past Date of Attendance Credits Earned  ficate Date of Graduation:

#### STUDENT RESPONSIBILITY

As a Post-Secondary student, YOU ARE RESPONISIBLE to ensure that all required documentation is on file and complete with the Higher Education Program - Education Department. Any misrepresentation or falsification, including failure to submit required documents as listed below is sufficient cause for cancellation/denial of San Carlos Apache Tribal Higher Education Program Award.

As student I shall adhere to the guidelines listed below:

- Submit a Higher Education Application by June 1st each academic year and November 1st for Winter/Spring semester.
- Documents must be postmarked by the deadline date.
  - a. Documents submitted after deadline date will be considered late and will result in Denial of the application.
- All first time/lapsed applicants must submit their Office High School transcript or G.E.D. Certificate and Test Scores. 3.
- Submit an official Certification of Indian Blood from the San Carlos Apache Tribe Enrollment Office on a yearly basis. 4.
- Submit an Official Transcript before June 1st for Fall Semester and November 1st for Spring Semester.
  - a. High School Transcripts (First Time Applicant)
  - b. Official College/University Transcripts (Lapsed or Reapplying Applicant)
- Complete an Application for a Free Application for Federal Student Aid Report Student Aid Report
- Submit a Letter of Admissions/Acceptance or Verification of Enrollment from an Accredited College/University.
- Submit Financial Needs Analysis to your college/university Financial Aid Office
  - a. Submit in a timely manner to college/university Financial Aid Officer
  - b. Follow up with FNA with Financial Aid Officer
- Submit a copy of Current Class Schedule
- 10. Submit a copy of Degree Plan I will be following
- 11. Submit a copy of Current Dorm/Lease Agreement while attending a College/University (Only for student who has Permanent Address on the San Carlos Apache Reservation)
- 12. Comply with the following academic standard **prior to receiving** funding:
  - i. Student shall maintain a Cumulative Grade Point Average of a 2.50 or higher with twelve (12) or more credit hours or equivalent amount of quarter or trimester credit hours. Graduated High School Senior 2.0 G.P.A. required. Students working a Master's Degree or PhD are required to have a 3.0 G.P.A.
  - ii. Student shall IMMEDIATELY submit an official transcript upon completion of each academic semester/quarter.
- 13. The Higher Education Program shall place recipient on a Probationary Award status if the recipient did not earn enough credit hours according to applicable academic standard during the last academic term and complete term with grade point average between a 0.00-2.49.
- 14. The following types of classes will not be accepted as part of a full-time course load; Audit, Repeats, Workshops or Continuing Education Units (CEU) credit classes.
- 15. The Higher Education Program shall place a recipient on a Probationary Award status if the recipient repeated courses within the minimum twelve (12) credit hours from previous academic terms while receiving financial assistance.
- 16. Submit a signed disclosure statement "Student Consent Release" specifying the individual(s) to receive this information.
  - a. The Higher Education Program will not release any information, verbally or written to any third-party individual or agencies, parents, spouse and elected officials etc.
- 17. A recipient shall utilize the awarded funds specifically for educational expenses. Other use shall warrant automatic suspension and repayment of funds.
- 18. Although Deadline dates are posted, All Completed Applications are reviewed on a first-come, first-served basis.
- a. All applicants are responsible for following up on their application status with the Higher Education Program.
- 19. Be RESPONSIBLE for understanding my rights and accountabilities regarding financial assistance, including to be informed of the Higher Education Policies herein.
- 20. Immediately report any CHANGES in Enrollment, Withdrawals and Transfers to the Higher Education Program.
- 21. Notify the Higher Education Program of your GRADUATION Date and shall submit a copy of degree and Official Transcript.
- 22. All Applicants must be officially and fully accepted to a Post-Secondary institution accredited by one of the six national accrediting associations as recognized, approved and adopted by the SCAT Education Committee:

MSA – Middle State Association of College and Schools NCA – Northern Central Association of College and Schools SACS – Southern Association of College and Schools NEASC – New England Association of College and Schools NASC – Northwest Association of College and Schools WASC – Western Association of College and Schools

- 23. Consider all available scholarships; such as Federal, State, Intuitional Aid and Private Sources separate from SCAT Higher Education Program Award.
- 24. Contact Indian Health Services for Medical Coverage Information (928) 475-2371

I hereby certify that information on this application and all the required documents that are submitted on my behalf are true and complete. I understand fully that any falsification or misrepresentation including Failure to Submit the required documents by deadline dates are sufficient for denial of Tribal Grant Award.

If and when, this application is approved I accept and agree to abide by and comply with the San Carlos Apache Tribe, Higher Education Program Policy and Procedures.

Signature of Applicant:	Date:	
	Page 3 of 4	

## STUDENT CONSENT FORM

#### NOTICE: ALL APPLICANT'S FILES SHALL BE KEPT CONFIDENTIAL BY THE SCAT EDUCATION DEPARTMENT

In order for the Education Department to disclose any information in regards to the recipient's records, <u>a</u> <u>written consent form must be completed and on file.</u> No direct or indirect information will be revealed to a third-party individual, such as spouse, parent(s), extended family member(s) and any elected official.

First Name:	Last Name:	S	SN:	
Phone:	Cell:	V	Vork:	
Permanent Mailing Address: (P.O. I	Box/Apt. # Street, City, State	e, Zip)		
Marital Status:S	pouse Name:	No. of De	ependent(s):	
		Tribal Affi	liation:	
(First Name) Mother's Name: (First Name)		T	ribal Affiliation:	
(First Name)	(Last Name)			
	o any person or to another	agency except p	m of records may be disclosed by oursuant to a written request by or	
hereby give authorization to the following individual(s):	ne SCAT Education Departm	nent to release an	y information or documents to	
Please mark one				
I Authorize no one to receive	e information on my behalf,	other than mysel	f.	
I Authorize these individuals	listed below to receive infor	rmation on my be	half.	
_				
Individual's Name	Relationship to Appli	cant I	nformation to be released	
In dividually Name	Dolotionskip to Appli	lo and	reference the real end of	
Individual's Name	Relationship to Appli	Cani	Information to be released	
Individual's Name	Relationship to Appli	icant I	Information to be released	
Individual's Name	Relationship to Appli	icant I	nformation to be released	
Applicants Authorized Signatur	re		Date	
			December 4 of 4	
			Page 4 of 4	