



NATIVE VILLAGE OF KOTZEBUE KOTZEBUE IRA

Higher Education

Scholarship Application Checklist

To be considered for the Higher education Scholarship you need to submit all of the following documents. Failure to do so may result in your not receiving an award and/or delay of funding under the Higher Education Program.*

- Application
- Verification of Enrollment to Kotzebue IRA**
- Official High School /College/GED Transcripts
- Copy of Birth Certificate or other acceptable proof of age
- Copy of Social Security Card
- Student Aid Report (S.A.R.) from the Application for Federal Student Aid (F.A.F.S.A.). You can apply at www.fafsa.ed.gov
- Copy of Acceptance letter from Educational institution to attend
- Budget Forecast/Need Sheet signed by a Financial Aid Officer at institution
- Two Letters of Recommendation
- Personal Statement of Future Goals and Career plans
- Certificate of Indian Blood

* If you are a returning student, please submit only:

- Financial Need Sheet Signed by Financial Aid Officer at Your Institution
- Official Transcripts
- Signed Personal Letter of Continuation
- Class Schedule

*Refer to H.E. Program Policies

**Please contact Kotzebue IRA Enrollment Coordinator at 442-3467 to verify enrollment

If you have any questions or concerns please contact Kotzebue IRA Education Director at 442-3467.

Native Village of Kotzebue 600 5th Ave PO Box 296 Kotzebue AK 99752

Ph (907) 442-3467 Toll Free 1-800-442-3467 Fax (907) 442-2162

Native Village of Kotzebue HIGHER EDUCATION SCHOLARSHIP APPLICATION

PERSONAL INFORMATION

Name (Last, First, MI)			Social Security Number		
Student's Home Address			Student's Address at School		
City	State	Zip Code	City	State	Zip Code
Telephone Number ()			Telephone Number ()		
Email Address			Date of Birth	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	
# of Dependent Children	Ages		Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Separated		
Tribe to which you are enrolled		Enrollment Number	Veteran <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, have you applied for benefits? <input type="checkbox"/> Yes <input type="checkbox"/> No	

EDUCATIONAL BACKGROUND

High School Attended	Date of Graduation / GED Certificate
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POST SECONDARY INSTITUTION(S) ATTENDED

Name	Address	Dates	Credits

COLLEGE / UNIVERSITY YOU PLAN TO ENTER

Name of College/University/School			Start Date	This School is Based On <input type="checkbox"/> Semesters <input type="checkbox"/> Quarters	
Address of Financial Aid Office			Field of Study		Expected Graduation Date
City	State	Zip Code	Degree Sought at Time of Application <input type="checkbox"/> AA <input type="checkbox"/> BA <input type="checkbox"/> BS <input type="checkbox"/> MA <input type="checkbox"/> Other: _____		
Telephone Number ()			Attendance in school <input type="checkbox"/> Full-time (12+credits) <input type="checkbox"/> Part-time(6-11 credits)		
Year in College <input type="checkbox"/> Freshman <input type="checkbox"/> Sophomore <input type="checkbox"/> Junior <input type="checkbox"/> Senior					

STUDENT'S PRIOR BIA FINANCIAL INFORMATION

Have you received a BIA or KOTZEBUE IRA education scholarship/ grant before? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, date of last grant
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STUDENT FINANCIAL INFORMATION FOR UPCOMING SCHOOL YEAR

List the Scholarships for Which You Have Applied	Award

I hereby certify that the information on these forms are true to the best of my knowledge and consent to the release of this information to the necessary agencies to complete my financial aid package.

Student Signature

Date



NATIVE VILLAGE OF KOTZEBUE KOTZEBUE IRA

AUTHORIZATION FOR RELEASE OF INFORMATION

I, _____, give my permission to the native Village of Kotzebue's Education department to verify any academic or financial information that is needed to determine my eligibility for funding. I hereby give my permission for as long as required or until revoked in writing by me to:

Native Village of Kotzebue
Education Department
600 5th Ave
PO Box 296
Kotzebue, AK 99752

Social Security Number

Date of Birth

Applicant Signature

Date

H.E. SCHOLARSHIP GRANT APPLICATION

GRIEVANCE PROCEDURES

Each applicant has the right to dispute any decision made by the Education Committee or Education Coordinator. The applicant must follow the grievance procedures found in 25 Code of Federal Regulations, Part 2.

The applicant must attempt to resolve the dispute by discussing the issue(s) with the Executive Director of the Kotzebue I.R.A. in person, in writing, or via teleconference. Should the dispute not be resolved, the applicant must request, in writing, a hearing before the Kotzebue I.R.A. Council.

The requested hearing shall take place at the next scheduled Kotzebue I.R.A. Council meeting. This hearing may be held in executive session at the request of the applicant, member(s) of the Council or any other relevant party. The decision rendered by the Kotzebue I.R.A. Council is final.