TONALEA CHAPTER STUDENT FINANCIAL ASSITANCE PROGRAM APPLICATION PACKET

Submit completed Application Packet to the:
Tonalea Chapter
Administration Office
P.O. Box 207
Tonalea, Arizona 86044-0207

Telephone#: (928)283-3430 Fax: (928)283-3435

INCOMPLETE PACKETS WILL NOT BE CONSIDERED.

SUBMIT ALL REQUIRED DOCUMENTS. ONLY COMPLETED APPLICATION PACKETS WILL BE CONSIDERED.

Important: Applications must be TYPED or PRINTED legibly in black ink. Incomplete and illegible applications will not be processed. Please do not after any part of this application. You will be notified by mail/e-mail when your application is processed. Please allow 4 to 6 weeks after the deadline for your application to be reviewed and processed. During these 4-6 weeks, DO NOT CALL about the status of your application unless there are changes that need to be made to your personal or school info mation.

- Applications including ALL supporting documents must be received by the specified deadline for each award. Tonalea Chapter Administration will not extend the deadlines.
- > Applications and supporting documents received via fax or email will not be considered or accepted.
- Qualified students will be awarded based on college classification. One award per semester and based on availability of scholarship funds. For example, one award for Fall Semester and one award for Spring Semester.
- Applicant must be registered with the Navajo Nation Election Office as a voting member of the Tonalea Chapter. If the student is 18 years or over, voting registration must be valid <u>six months</u> prior to applying for assistance, OR
- Parent or Legal Guardian of the Applicant must be registered with the Navajo Nation Election Office as voting members of the Tonalea Chapter. If Applicant is under 18 years of age, the Parent's or Legal Guardian's voting registration must be valid <u>six months</u> prior to applying for assistance.
- Approval for student financial assistance depends on availability of funds and applications will be processed in the order they are received (first come, first serve).
- If the student is 18 years or over, after 6 weeks, you may inquire on the status of your application. Your parent(s), legal guardian(s), relative(s) or acquaintance(s) may not inquire for you. Administration Staff cannot release any information due to the Privacy Act, unless we obtain a notarized written consent from you.

THANK YOU FOR APPLYING
FOR THE TONALEA CHAPTER STUDENT FINANCIAL ASSISTANCE PROGRAM

Chapter Manager: Betty Tso

TONALEA CHAPTER STUDENT FINANCIAL ASSISTANCE PROGRAM VERIFICATION CHECK LIST

| Name Of Applicant: | LAST NAME: | FIRST NAME: | MIDDLE INITIAL |
|---|--|--|---|
| | | | |
| 2. Letter of Admiss 3. Verification of E 4. Official Transcri envelope from la or university) 5. Cumulative Grad 6. Certificate of Ind 7. Social Security C 8. ID/ Driver's Lice 9. Voter's Registra (If Applicant is 1 10.Essay — 2,000 wd Provide some efficient and s Identify some community th What are you & self-sustain Explain why la generation m Explain why p thoughts or id What type of events where [Use APA(Am) Other top previously Reviewed/Received B | pt (Current transcript must ast semester in school - high de Point Average (GPA) must dian Blood (CIB) ard use tion with the Navajo Nation 8 years of age or older) ord typed essay on one of ideas on how to improve your communicationable with the dwindling energy problematic issues in your communicat these issues should be considered a plans to help alleviate these issues ing? anguage, culture, tradition and clan a aintain these essential customs as a colitics cannot be mixed with business deas of local tribal government compalternative form of government is surplus business was mixed with politics. Wherlean Psychological Association) cital of the property of the politics of the property of the politics with the politics of t | is Invalid. It be in a sealed In school, college Ist be 2.0 or higher In Election Office The following (font size of the font size of the following (font size of the font size of the following (font size of the font size of the following (font size of the font size of the following (font size of the font si | d homes that are energy nicate or educate your an(s) for improvement. ome economically viable how would the next chings? colitics? What are your deral government? ovide examples on past the event(s)? |
| Signature | e/Title of Administration S | itaff | Date |
| | (Official Use To be completed by Adminis | • • | |
| Fund Approval Denied / Appro All Documents Check Number | | PAID STAMP: | |

TONALEA CHAPTER STUDENT FINANCIAL ASSISTANCE PROGRAM

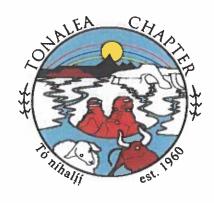
(TCSFAP) APPLICATION

Term Applying for (Complete ONE) 20 Fall Semester 20 Spring Semester 20 Other Please note this is a one time

Please note this is a one time assistance, per semester and scholarship amount varies depending on college classification.

Tonalea Chapter Post Office Box 207 Tonalea, Arizona 86044-0207 Telephone: (928)283-3430

Fax: (928)283-3435



| A: STUDENT INFORMATION | | | | | | | | |
|--|----------------------------|--|--|--|--|---|--|--|
| fle, First): Social Security Number: | | | | Census Number: | | | | |
| Current Mailing Address: | | | | | Telephone No.: | | | |
| Permanent Home Address: | | | | | Alternate Telephone No.: | | | |
| | | | | | | | | |
| G | ender | Marital Stat | Marital Status: | | Are you | a Veteran? | | |
| Male | Female | | | YES | NO | | | |
| Are you Registered with the Navajo Nation Election Office? | | | | NO | | | | |
| | If yes, when did you r | | | | | | | |
| Mother's Name: Mailing Address: | | | ess: | | Ethnic: | | | |
| Father's Name | | | Mailing Address: | | | Ethnic: | | |
| Guardian's Name/Relation: | | | Mailing Address: | | | Ethnic: | | |
| | G Male ered with the | Gender Male Female ered with the Navajo Nation E | First): Social Security N Gender Marital State Male Female red with the Navajo Nation Election Office? If yes e: Mailing Addition Addit | First): Social Security Number: Gender Marital Status: Male Female red with the Navajo Nation Election Office? YES If yes, when did you r e: Mailing Address: Mailing Address: | First): Social Security Number: Alter Gender Marital Status: Male Female ered with the Navajo Nation Election Office? YES NO If yes, when did you register? e: Mailing Address: Mailing Address: | First): Social Security Number: Census Number: Telephone N Alternate Telepho Are you Male Female Pered with the Navajo Nation Election Office? If yes, when did you register? Pered Mailing Address: End Mailing Address: End Mailing Address: | | |

B: SCHOOL INFORMATION

| High School (Name, City, and State): | | | | | Month/Year of Graduation or GED Certificate: | | | |
|---|--------------|--------------------|--------------|--------------------------------|--|-------------------------------------|------------------|-------------------------|
| | | Co | llege Classi | fication (Circl | e One) | | | |
| Freshman | Sopho | omore | Ju | nior | Senior | Post Graduate | | State of the leading of |
| School you will be attending? (Name, City, and State) | | | | | 27 592 | | Major Field of S | tudy: |
| | | Address of sch | nool Financi | ial Aid Office | & Phone Numb | er: | | |
| Type of School (Check one) | | ☐ University | ☐ College | 🔲 Jr. Colle | ege 🗆 Techni | cal 🗆 Oth | er (List): | |
| Type of Degree you are see | eking? | Do you ha | ive a letter | of Acceptance | e? (circle) | Status while attending (circle one) | | |
| | | | YES | NO | 18 10 10 10 10 m | | Full-Time | Part-Time |
| Total Hours/credits of semeste | er or term | applying for: | | 100 | | | | |
| Total Hours Earned: | | | | Cummulative GPA: | | | | |
| Anticipated Graduation Dat | te (month | ı/year): | | | | | | |
| Nam | ne of Colles | ge/University la | ist attender | d: | | | Month/Yea | r: |
| Have you received assistance from the Chapter before? | | | 16 | s, when? Institution Attended: | | adad. | | |
| | | . core occupred ne | |) it yes | , wrien? | | Institution Atte | naea: |

PLEASE READ THE FOLLOWING SECTION CAREFULLY BEFORE SIGNING AND SUBMITTING THIS APPLICATION.

My signature below verifies that all of the information contained in this application is true and accurate. I agree to maintain standards of good citizenship and to obey the laws and regulations of the land and the educational institution I am attending. I understand that this scholarship may be revoked if I am unable to maintain these standards.

I also understand that if I withdraw or am suspended from school for any reason, other than a medical release from a doctor, I am responsible to repay the award in full before being eligible to receive additional scholarships. Any changes in my personal (address, change in school, etc.) or academic (full-time or part-time, suspension, withdrawl, etc.) status, require notification to Tonalea Chapter Administration immediately. Failure to do so may result in termination of my scholarship.

I hereby give permission to Tonalea Chapter Administration to access any financial and academic information on file in any office.

| Print Name | | Applicant Signat | ure | Date |
|----------------------------|---------------|----------------------|--|-----------|
| Washington May | FOR OFFICE | USE ONLY - DO NOT WR | ITE IN THIS AREA | |
| Semester of Funding: | Status: FT/PT | Total Hours: | Award Amount: | Cum. GPA: |
| THE RESERVENCE | | 10 11 11 | 3 | |
| C NUGETRI IL SERVI | | ¥ | | |
| | 31 | | | |
| Betty Tso, Chapter Manager | | Alfonda Watson | Alfonda Watson, Marlinda Wh Iministrative Assistant Secretary/ Ti | |

SCHOLARSHIP AND FINANCIAL ASSISTANCE

POLICIES AND PROCEDURES

This policies and procedures will supercede the TCDC Resolution for the Chapter Scholarship/

Financial Assistance

MISSION STATEMENT

The mission of the Tonalea Chapter is to provide assistance in form of scholarships to the community youth and members for their educational needs and goals utilizing the Navajo Nation Budgeted Scholarship Funds.

GOALS

The goal of the Tonalea Chapter is to pave a path and provide an opportunity for all community youth and members to embrace and enrich their educational horizons and paradigms by pursuing a higher education.

OBJECTIVES

The major objective of the Tonalea Chapter is to encourage the community youth and members to obtain a degree in respective field of study and obtain employment within the Navajo Reservation to enrich every aspect of the community and the Navajo Nation.

COMMITMENT

The Tonalea Chapter is pledging a sincere commitment to provide information regarding scholarship ssistance, employment, and making the initial investments in the youth to build a strong foundation for the leadership of the community of the Navajo Nation.

Before the potential applicant can be eligible for scholarship assistance, he or she must be on the Chapter planning and regular meeting agenda with completed and accurate documents.

Applicants will not be available until the opening dates listed below. The Chapter will not accept any early applications or faxed applications due to first-come-first serve basis. The deadline date will be the 15th of the identified months or the date of the regular Chapter meeting, which ever comes first. The deadline dates will vary also based on Fund Availability for Scholarship.

OPENING DATES

- 1. Fall Semester August 1st
- 2. Spring Semester January 1st
- 3. Summer Semester June 1st

DEADLINE DATES

- 1. Fall Semester August Chapter Meeting Date or August 15th
- 2. Spring Semester January Chapter Meeting Date or January 15th
- 3. Summer Semester June Chapter Meeting Date or June 15th

ELIGIBILITY

1. The student must be registered voter of the Tonalea Chapter for at least 16 months or a parent must be registered voter for 1 year to apply.

- 2. The student must be enrolled full-time or part-time in an accredited college, university, vocational, or technical school.
- 3. The student must be a member of the Navajo Nation with a Census number.

REQUIRED DOCUMENTS

- 1. Accurately completed Chapter Scholarship Application and date stamped by the Chapter administration.
- 2. Social Security Card
- 3. Census Number
- 4. Voter Registration Card
- 5. High School Transcript
- 6. Current Class Schedule
- 7. Original Letter of Acceptance from the school

STUDENT RESPONSIBILITIES

Before any application is accepted, all essential documents must be present or the application will be considered incomplete and denied.

- 1. Come to the Chapter to pick-up and turn in all essential documents mentioned above in a timely manner.
- 2. Be present at the Chapter planning and regular meeting as scheduled.
- 3. Submit an official transcript at the end of each awarded semester to the Chapter.
- 4. Maintain a GPA of 2.0 (C) or above.

CHAPTER STAFF RESPONSIBILITIES

It will not be the responsibility of the Chapter staff to compile documents for the applicants. Also, Chapter staff is not responsible for lost or damaged documents.

- 1. Provide applications upon opening dates.
- 2. Inform the students of the Chapter meeting
- **3.** Safeguard all essential documents and file them according to the Records Management Policies and Procedures.
- 4. Prepare resolution for each applicant for the upcoming Chapter meeting.
- 5. Make periodic and random follow-ups on all scholarship recipients to check on attendance and academic progress.

AWARD AMOUNTS

The listed amounts are based on fund availability and based on the semi-annually Navajo Nation Scholarship Allocations. If the funds are limited, the award amounts shall be reduced to benefits more students and/or the number of students accepted/awarded reduced.

- 1. University students shall be eligible according to Tonalea Chapter allocated budget per Fiscal Year.
- 2. Community College, Vocational, and Technical students shall be eligible according to Tonalea Chapter allocated budget per Fiscal Year.

STUDENT OBLIGATIONS

Upon the award, the student must meet the following conditions.

1. Utilized the awarded funds toward educational needs and goals.

2. Submit requested transcript at the end of each awarded semester.

PROBATION/REPAYMENT

The Probation Period shall be one (1) full school year for any following reasons:

- 1. The student withdraws of school.
- 2. The students lack of attendance
- 3. The student drops below the reported credit hours amount per classification, such as less than 12 credits for full-time or less than 3 credits for part-time.
- 4. The students GPA falls below 2.0 or C grade equivalent.
- 5. The student fails to submit an official transcript at the end of the awarded semester.
- 6. The student fails to complete their registered semester. The student will then be obligated to repay the funds back to the Chapter and they will be put on probation.

The Chapter is always open to hear innovative ideas regarding our community improvements, so please do not hesitate to contact the Chapter with any suggestion by mail or telephone.

Tonalea Chapter P.O. Box 207 TONALEA, AZ 86044

Telephone: (928)-283-3430 Fax: (928)-283-3435 or 3356



TO' NIHALII'

President: Darryl Jim District One - Western Navajo Agency
Vice President: Leslie Dele Tonalea Chapter
Secretary/Treasurer:Marlinda Whiterock P.O. Box 207

Tonalea, Arizona 86044-0207

Phone: (928) 283.3430 Email: tonalea@navajochapters.org

Council Delegate: Helena N. Begay Grazing Official; Bruce Daw

Fax: (928) 283.3435

MEMORANDUM

| DATE: | | |
|---------------|---|--|
| TO: | TONALEA CHAPTER ADMINIST | RATION |
| FROM: | Colle | ge Recipient |
| SUBJECT: | Understanding of Obligation for: Scholarship and Financial Assista Chapter Scholarship Financial Assistance Policies and | |
| | have read an olicies and Procedures. | d understand the Chapter Scholarship and Financial |
| | | hat upon my award of the Chapter Scholarship and |
| | | funds for my educational expenses at specified in the |
| | | also understand that as specified in the Chapter |
| | | e obligated to repay the awarded funds if I misuse the |
| | | and without notification to the Tonalea Chapter. |
| Student Signa | ature Date | Parent Signature (if applicable) Date |