



Gila River Indian Community Student Services Department

Scholarship Application
Spring Deadline October 15
Fall Deadline June 15

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Applicants:

Welcome to the Gila River Indian Community (GRIC) Student Services Department. We are very excited that you have taken your first step to achieving a higher education. In this packet you will find: an Application, FAFSA Worksheet, CDIB Release of Authorization Form, and the GRIC Policy Manual. If you are missing one of these documents please let us know.

The application could be a tedious process therefore; we encourage you to start as soon as possible to ensure all your documents are in on time. Student Services does not accept late applications. If you are mailing your application make sure to send it via certified mail and that it is post marked by the deadline date. If your application is incomplete it will be mailed back to you.

Here is a list of Higher Education and Vocational/Technical Institutions that are currently on moratorium. Therefore, the Gila River Indian Community Scholarship Program does not fund any student to attend these institutions.

- University of Phoenix
- Remington College
- Arizona Automotive Institution
- Artistic Beauty College and
- Maricopa Skills Center
- Everest College (**Pending Accreditation**)

If you were interested in one of these schools because it offers your Program of Study or your major is undecided, the Arizona College and Career Guide (<http://accg.azhighered.org>) is a great resource guide to help you find all the institutions in Arizona that offer the degree you are seeking.

Once your application is completed it will be sent to the committee for review. You will be notified 3-4 weeks after the deadline date via mail. **All application approvals are contingent on available funds.** Again, congratulations and good luck on your future endeavors.



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Eligibility Requirements:

- An Enrolled Member of Gila River Indian Community and
- A High School Graduate or GED recipient (*If you are a high school senior and have not graduated you may submit your transcripts 2 weeks after your graduation date*)

Required Documents:

- Application
- Typed 200 word essay (Summarizing your educational goals and future plans; please make sure you sign your essay)
- Official High School Transcript or Official GED Scores (Documents must be in a sealed and unopened envelope **from** the school/state office to be considered official)
- Official Certificate Degree of Indian Blood (CDIB) (The Authorization to Release (ATR) form is attached; **you must fill out the form and send it to the Enrollment Office**. Please do **NOT** attach ATR with Application. Student Services will then request your CDIB)
- Copy of your Social Security Card (with your current legal name and signature)
- Copy of Admission/Acceptance letter (Conditionally admitted letters will not be accepted.)
- Copy of Official Enrollment Agreement from your School (you may not start your program until 6 weeks after the deadline date) **Vocational/Quarter Schools ONLY**
- Copy of your Student Aid Report (SAR) listing the school you will be attending. (The SAR is generated 3-4 days after you completed your FAFSA. You must complete your FAFSA online at www.fafsa.ed.gov. If you are under the age of 24, not married or do not have children you must provide your parents personal and income information)
- Copy of Program of Study (Shows the courses required to receive your degree)
- Copy of class schedule for the upcoming Semester/Term
- College Advisor's Name and Telephone Number (Can be their business card)
- All Official College/Vocational Transcripts Previously Attended (even if Student Services did not pay for those credits)

All listed documents are required and must be turned in via certified mail or hand delivered (no fax or electronic applications will be accepted) no later than the deadline date (no late applications are accepted). If the deadline dates falls on a weekend applications must be received the Friday before unless otherwise stated.



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Personal Information *(please write legible)*

Full Legal Name _____
Last, First M.

Former Name (if applicable) _____
Last, First M.

Social Security Number: _____ Date of Birth: _____

Home/Permanent Address _____

Mailing Address (if different from above) _____

E-mail Address _____

Permanent Telephone: _____ Cell Number: _____

Gender: Male Female District: I II III IV V VI VII

GRIC Enrollment Number: _____

Emergency Contact Name: _____

Relationship: _____

Address: _____

Home Phone: _____

Cell Phone: _____



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Previous School Information

Are you a High School Graduate? _____ Graduation Date: _____

Name of High School: _____

Location of High School: _____
City State

Are you a GED recipient? _____ Date GED received: _____

Location GED was received: _____
Location Name
City State

Have you been funded by the GRIC Scholarship Program before? _____

If yes, School Name(s): 1) _____

2) _____

Year(s) Attended: _____

Degree(s) Awarded (if any): _____

If no degree was awarded, briefly state the reasons for withdrawing from school.

You may provide more details in your personal essay.



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New School Information

Name of School: _____

School Address: _____

City

State

Zip

Your program of study: (Major) _____

(Minor if any) _____

What Degree are you working on? Diploma Certificate Associates Bachelors

Masters Doctorate Other _____

What is your grade level? New/Freshmen 2nd Year/Sophomore 3rd Year/ Junior

4th Year/Senior Other _____

How many credits will you be taking? less than 3hrs 3 - 6hrs 6-9hrs 12 or more

Are you receiving any other financial assistance/per capita/educational assistance through any other GRIC entity? _____

If yes, which department and amount? _____

Where do you plan to live? On Campus Off Campus With Parent

What is your anticipated graduation date? _____

Month

Year

Do you plan to work? Yes No I don't know

If yes, how many hours per week? _____

Student Services Department, P.O. Box 97, Sacaton, AZ 85147 P: (520)562-3316 F: (520)562-3348

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The following questions are to assist Student Services with any special circumstances, which may affect your educational progress or program completion.

Do you have any conditions that may affect your ability to complete your program of study?

If yes, please explain: _____

Are you currently in default with any school loans? _____

If yes, please explain (put school information and dates) and contact your financial aid office to request a deferment.

Are you currently on probation/parole for a crime or pending charges? _____

If yes, please explain (and indicate when probation/parole will end): _____

I hereby certify that the information that I have provided in this application is true, and I have answered the questions to the best of my ability. Furthermore; I understand that if I knowingly provide information that is determined to be false, I will be dismissed from the Gila River Indian Community Higher Education Program.

Signature: _____ Date: _____

Print Name: _____

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RELEASE OF INFORMATION

Student Name: _____

Social Security Number: _____ Date of Birth: _____

Address: _____

School Name: _____

I, _____ (*print name*) authorize the Gila River Indian Community (GRIC) Student Services Department to release the information regarding my financial assistance to _____ (*Name of School*).

I, _____ (*initials*) authorize the release of necessary records regarding my financial funding or educational progress (i.e. progress reports) to the GRIC Student Services Department.

I, _____ (*initials*) consent to having my name and/or picture placed in the Gila River News and/or Scholar's Newsletter for any educational accomplishments I may receive.

I, _____ (*initials*) authorize GRIC Student Services Department to release my information to GRIC Human Resource Department after my graduation for recruitment purposes.

I, _____ (*initials*) am interested in participating in an internship program if I meet the eligibility requirements

Student Signature: _____ Date: _____

If student is under the age of 18, parent/guardian signs below:

I, _____ the parent of _____ (*the student*) have read this document and do hereby authorize the release of information for specific purposes stated above.

Parent/Guardian Signature: _____ Date: _____

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AGREEMENT TO THE CODE OF CONDUCT

Student Name: _____ Social Security Number _____

Gila River Indian Community's Student Services Policy Manual has outlined the Code of Conduct in order to promote responsibility, respect, and a safe environment for all individuals. Students are expected to be law abiding individuals and to be accountable for any actions that put themselves and/or others at risk. The Student Services Department expects all students to read this document carefully and understand the importance.

I, _____ (print name) will conduct myself in a manner that promotes a positive self image that is a credit to myself and to the Gila River Indian Community.

I, _____ (initials) have read Section 15, Item C of the GRIC higher Education Policy Manual and understand the definition of offensive behavior.

I, _____ (initials) understand that exhibiting offensive behavior toward educational institutions personnel, GRIC Student Services Staff, Community Department Employees or any Community officials will be considered a violation of the Code of Conduct.

I, _____ (initials) will not use Program funds for any purposes other than those stated in Section 10 of the GRIC higher Education Policy Manual.

I acknowledge that I have received a copy of the GRIC Higher Education Policy Manual Section 15 Code of Conduct and I will be accountable for my behavior and for the behavior of any person I designate to represent me. I fully understand any violations of the Code of Conduct will be subject to disciplinary consequences that may result in probation and/or suspension of program funding. I agree to fully abide by the Code of Conduct.

Student Signature: _____ Date: _____

Reviewed by: _____ Date: _____



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OBLIGATION OF UNDERSTANDING

Student Name: _____ Social Security Number _____

I, _____ (*initials*) acknowledge that I have reviewed and received the Higher Education Policies. I hereby certify that the information submitted is true to the best of my knowledge. Any violations of this agreement may be grounds for immediate suspension for the Gila River Indian Community Higher Education Program and placed on file for future reference.

PENALTES

I, _____ (*initials*) also understand that any reports of misrepresentation, misappropriation of funds or noncompliance with any agreement with the Higher Education Program will be investigated and subject to the criminal penalties and civil remedies of the Gila River Indian Community.

RETURN OF PROGRAM FUNDS

I, _____ (*initials*) understand that if I do not comply with the Gila River Indian Community's Higher Education Program Policies and I am disqualified, I am responsible to repay the community back for any balance owed from the semester/term/block currently enrolled.

TAXABLE PORTIONS OF HIGHER EDUCATION FUNDS

A portion of the Gila River Indian Community Higher Education Program funds may be taxable. Students are advised to report any taxable amount to the Internal Revenue Service.

I, _____ (*initials*) understand that I am responsible for payment of such taxes owed for program funds and that the Gila River Indian Community Higher Education Program will not be responsible for the payment or repayment of such taxes.

Student Signature: _____ Date: _____

Parent Signature: _____ Date: _____

(If student is under the age of 18)

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