

**TURTLE MOUNTAIN
BAND OF CHIPPEWA INDIANS
---SCHOLARSHIP PROGRAM---
POST OFFICE BOX 900
BELCOURT, NORTH DAKOTA 58316**

OFFICE TELEPHONE # (701) 477-8102

FAX # (701) 477-8053

**DOCUMENTS REQUIRED TO COMPLETE TRIBAL HIGHER EDUCATION SCHOLARSHIP
PROGRAM APPLICATION FILE -- PART A:**

1. **FORM THESP:** This Form is used for the initial application and can be requested from the Tribal Scholarship Office, Post Office Box 900, Belcourt, North Dakota 58316 and the Office Telephone number is listed above as well as the Office Fax Number. The Application **MUST** be completed and received in our Office **NO LATER THAN SEPTEMBER 1st** for the Academic Year.
2. To complete your file, the following documents **MUST** be received in this Office **with your Application**. (NOTE: #2-a and #2-d is required for **first time college-bound students**):
 - 2-a. **CERTIFICATE OF DEGREE OF INDIAN BLOOD**: If you do not have your certificate, this document can be obtained by requesting in writing to the:

BIA-Turtle Mountain Agency, Branch of Enrollment
Post Office Box 60
Belcourt, North Dakota 58316 **or call:** (Telephone #(701) 477-6141)

(NOTE: This Certificate of Degree of Indian Blood is REQUIRED to submit for the FIRST TIME COLLEGE-BOUND STUDENTS.)
 - 2-b. **LETTER OF ACCEPTANCE/ADMISSION** from the college/university that the applicant is attending.
 - 2-c. **STUDENT AWARD LETTER**: An Award Notice from the Financial Student Aid Department at the College/University Attending. This document must list Expenses and Resources for the Academic year.
 - 2-d. **HIGH SCHOOL TRANSCRIPT or GED CERTIFICATE**: Information must indicate Completion of high school education. **(NOTE: The High School Transcript or GED Certificate IS REQUIRED for the FIRST TIME COLLEGE-BOUND STUDENTS.)**
 - 2-e. **CONTINUING COLLEGE STUDENTS**: College Transcripts **MUST BE SUBMITTED after each semester.**
3. College students **MUST RE-APPLY every year.**
4. Students who become eligible for funding are funded based on the following priorities:
 1. SENIORS, regardless of residency, and/or need to attend summer session in order to graduate;
 2. JUNIORS who need to attend summer session in order to become Seniors;
 3. STUDENTS who need to a summer term to acquire a two-year degree (AA, AS, AAS);
 4. SOPHOMORE; 5. FRESHMAN 6. GRADUATE

SUSPENSION

Students will be notified by a 'Certified Letter' IF placed under 'SUSPENSION STATUS' due to the following:

1. Withdraws from all or a majority of classes during any one scholarship funded term;
2. Fails to meet the Minimum Academic Guidelines for TWO Consecutive terms;
3. Earns an extremely LOW GPA (below 1.0) in any one funded term;

NOTE: REINSTATEMENT to the Tribal Scholarship Program REQUIRES the 'Suspended' Student to SUCCESSFULLY complete 12 Semester/quarter credit hours with a 2.0 GPA or above for his/her Major Field of Study.

APPEALS

Extenuating and justifiable circumstances may exempt a student from immediate 'Suspension'. However, it is the Student's responsibility to notify the Scholarship Program Director IMMEDIATELY of the 'Circumstances' and submit Written Documentation of the 'Circumstances' to our Office.

STUDENT'S WISHING TO APPEAL DENIAL OF FUNDING (Suspension Status) MUST:

1. **Submit:**
 - A. **Written Documentation for Reasons of 'Appeal';**
 - B. **Letters of Support from college personnel;**
 - C. **Medical Doctor Statements;**
 - D. **Any documentation in cases of death of a family member which cause the Student a hardship status, etc.**
2. **The Scholarship Board Members, who serve as the 'Appeals Committee' will be convened to hear and review ALL documentations related to the Appeal. The Student may be present at this meeting. (Any expenses associated with the Student being present at meeting will be of the Student.)**
3. **The Scholarship Board Members will make a decision based on the documentation(s) that were submitted and any other information the student wishes to 'orally' provide.**
4. **Once the Board Members DETERMINES a decision, the Scholarship Director will NOTIFY the student in writing by Certified Mail within FIVE (5) working days of meeting. THE DECISION OF THE TRIBAL SCHOLARSHIP BOARD MEMBERS WILL BE FINAL.**

**TURTLE MOUNTAIN BAND OF CHIPPEWA INDIANS
TRIBAL HIGHER EDUCATION SCHOLARSHIP PROGRAM (TSP) APPLICATION
POST OFFICE BOX 900 BELCOURT, NORTH DAKOTA 58316
TELEPHONE # (701) 477-8102 FAX #(701) 477-8053**

INDICATE THE SCHOOL TERM YEAR: _____ APPLICATION

FIRST NAME: _____ MIDDLE NAME: _____ LAST NAME _____

MAIDEN NAME: _____ Other Names Used: _____

This Application is for (Circle One): New Student Continuing Student Former Student Graduate Student

Social Security # _____ - _____ - _____ Age: _____ DATE OF BIRTH: _____

Martial Status: Single Married Other Gender: Female Male

Telephone No. _____

ADDRESS* _____
(P.O. Box No. or Street Address)

_____ (City, State, Zip Code)

(*Any correspondence regarding your funding, Academic Progress, Etc. will be sent to you at the above address listed.)

High School Graduate: Yes No Year Graduated: _____ GED Graduate: Yes No

Type of High School: BIA Tribal Private Mission Public

List Name, City & State of High School graduated from: _____
(Name of High School)

_____ (City) (State) (Zip Code)

Name & Address of College/University Attending:

Year in College: 1 2 3 4 GRD

Major Field of Study: _____

(City) (State) (Zip Code)

Expected Degree: AA AS AAS BA BS

Expected Date of Graduation: _____

Indicate EACH School Term you will be attending: Academic Year; Indicate if requesting funds for Summer _____

_____ Fall Qtr/Sem. Wtr Qtr/Sem. Spring Qtr/Sem.

Permission for Information Release

I hereby certify that the above information on this form is true and correct to the best of my knowledge and consent the release of this information to and from necessary agencies in order to complete my TSP File. I understand that any Tribal Scholarship awarded to me will be mailed in care of the College/University Financial Aid Office that I will be attending and should I fail to satisfy the academic requirements, I further understand that failure to prove the Turtle Mountain Scholarship Office with a Transcript and/or grades promptly upon completion of the Semester/Quarter may result in a delay of funding. I also grant the TSP Office permission to request my transcript, if needed, and to release my name and address to prospective employers upon completion of my field of study.

SIGNATURE: _____

DATE: _____