



How to Apply for BIA Higher Education, AVT, and SIAMSCHA Assistance: if you need assistance to apply for BIA Higher Education, AVT, or SIAMSCHA assistance, please contact the Nooksack Indian Tribe Education Office. You can reach them by:

- Mailing: P.O. Box 157, Deming, WA 98244
- Calling: 360-966-2043
- Or visiting the Nooksack Tribe's Education Department website to download the application:
<https://nooksacktribe.org/departments/education/>
- **Important: Please ensure that all required documents are properly organized and NUMBERED in order found in the check list.**

Application Check list	BIA Higher Education	SIAMCHA
1. Acceptance Letter (NEW STUDENTS)	YES	YES
2. Essay/statement	At least 250 words	No more Than 1000 words
3. Unofficial Transcripts	YES	NO
4. Documentation you submitted a FAFSA (current year – up to date)	YES	YES
5. Program Degree Evaluation (updated copy for all students)	YES	YES
6. Tribal Enrollment (First Year Applicants)	YES	YES
7. College Registration / Student Schedule (all students)	YES	YES
8. Invoices/tuition statements	YES	NO
9. Financial Needs Analysis (up to date copy)	YES	YES
10. BIA/AVT/TRIBAL HIGHER ED	YES	YES
11. College FERPA Form	YES	YES
12. Tribal Higher Ed Scholarship verification form	NO	NO

*****NO FRAGMENTED APPLICATIONS WILL BE ACCEPTED*****



BIA / TRIBAL HIGHER EDUCATION ASSISTANCE APPLICATION

Applying to attend school: _____ Full Time _____ Part Time

Semester: Fall 20____ Spring 20____ Summer 20____

Quarter: Fall 20____ Winter 20____ Spring 20____

I am applying for: _____ BIA Higher Education Grant OR _____ Siamsha Assistance Program

NAME: _____
LAST FIRST MIDDLE

Mailing Address City State ZIP

Permanent Address City State ZIP

(____) _____
Primary Phone Number Email Address

Tribal Enrollment Number: _____ Student ID: _____ Date of Birth ____/____/____

High School/GED _____

College/School to Attend: _____

School Address City State ZIP

College/School Class: _____ Freshman _____ Sophomore _____ Junior _____ Senior

Expected Degree: _____ AA _____ BA _____ MA/Ph.D.

Major: _____ Year to Graduate: _____

Have you received a previous Higher Education or Adult Vocational Training Grant? _____ Yes _____ No

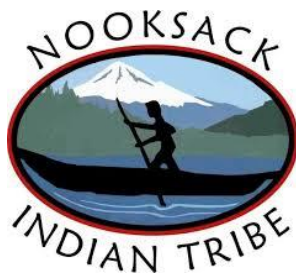
Have you completed and submitted your Financial Aid Application (FAFSA)? _____ Yes _____ No

Answer all items completely. Incomplete Applications will NOT be processed.

I hereby certify that the above information on this form is true and correct to the best of my knowledge and consent to the release of this information to necessary agencies to complete my financial aid package. I request that any BIA grant awarded to me be mailed to the **Financial Aid Office** of the institution in care of me. I will provide a copy of my grades or transcripts to the NIT Education Office at the end of each academic quarter/semester.

Signature of Student Date

For office use only: Student Status: _____ New _____ Returning _____ Transfer _____ Continuing



BIA / TRIBAL HIGHER EDUCATION ASSISTANCE NEEDS ANALYSIS FORM

#9

I. To Be Completed by the Student:

Name: _____ Social Security Number: _____
 (please print)
 Email: _____ Telephone: _____
 Home Address: _____
 Street or PO Box City State ZIP
 Year in College: _____ Full-Time or Part-Time: _____ Tribal Agency: _____

 Signature of Student Date

II. To Be Completed by the Financial Aid Office:

The above named student is applying for the Nooksack Indian Tribe's Higher Education Program for financial assistance to attend your institution. As a condition for receiving tribal assistance, the applicant must annually complete the Free Application for Federal Student Aid and submit the results to your office. Please answer the following questions and return the form directly to our office:

Has the applicant completed the FAFSA and made the results known to your office? ____ Yes ____ No

Expenses		Personal Resources		Other Resources	
Tuition		Personal Contribution		PELL Grant	
Fees		Parent Contribution		State Need	
Books/Supplies		Veteran's Benefit		Loans	
Transportation		CWS		Work Study	
Room/Board		Social Security		Scholarships	
Personal		Voc. Rehab			
Other		Other		Other	
TOTAL		TOTAL		TOTAL	

Student's Unmet Need -

(EXPENSES – PERSONAL and OTHER RESOURCES = Unmet Need)

Higher Education Grant would cover expenses for the period:

_____ to _____ Beginning on _____
 Month/Year Month/Year
 _____ () _____
 Name of Institution Phone

 Address City State ZIP

 Financial Aid Officer Date
 Our Academic terms are on: Semester _____ Quarter _____ Other _____
 Student is currently registered as: _____ Full-Time _____ Part-Time _____ Other (please list) _____



BIA / TRIBAL HIGHER EDUCATION AWARD FUNDING AGREEMENT

#10

Initial each section after reading:

___ I understand that if I am eligible, a Nooksack Higher education award will be made available to me through the financial aid office at the college that I attend.

___ I also understand that this award is to assist my educational expenses while I am enrolled in a college/university and maintaining a 2.0 grade point average or better.

___ I further understand that I am responsible to submit a transcript at the end of each term and class schedule at the beginning of each term; if I fail to submit those documents by the deadline, I may lose my NIT higher education award.

___ I further understand that if I fail to maintain a 2.0 grade point average, I will be placed on academic probation. If I fail to meet a 2.0 grade point average for two consecutive quarters, I will be placed on grant suspension. In order to re-establish eligibility, I must complete one full-time term on with my own resources.

___ I further understand that it is my responsibility to inform the NIT education office if I withdraw for any reason or dropout before the end of the academic quarter/semester and receive 0.0 GPA and 0 credits for the grading period, and that I will be placed on permanent academic probation and may be required to reimburse all awarded funds.

___ I understand that NIT Higher Ed does not pay for repeat classes or F grades. Repeat classes and F grades will be deducted from the award amount. I further understand that I may appeal the decision before the NIT higher Ed Advisory Committee.

___ I understand that I must apply and submit documentation verifying that I have applied to a minimum of two outside scholarships for each academic year I am requesting funding.

___ I agree that I will provide a degree audit at the end of the first year for students and at the end of the third year for bachelor students.

___ I understand that Nooksack Higher Education is not responsible for the repayment of any student loans I may borrow.

___ I understand that all awards are subject to availability

Signature

Date



BIA / TRIBAL HIGHER EDUCATION ASSISTANCE VERIFICATION FORM

#12

As a student you are encouraged to apply for scholarships. In order to receive higher education funds, you must submit verification that you applied for a minimum of two scholarships to help pay for the cost of attending college.

The NIT Higher Education Program is requiring students to apply for at least two outside scholarships so that students will have the opportunity to receive “free” money that can be used toward their college expenses and may reduce or eliminate the need for student loans.

I, _____ hereby agree to submit documentation verifying that I have applied for a minimum of two outside scholarships for each academic year I am requesting funding.

I agree that prior to the first day of classes for the academic year for which I receive funding I will provide documentation showing that I have applied to a minimum of two outside scholarships prior to the first day of the academic year.

The following items are acceptable forms of verifications:

- Scholarship award letter
- Scholarship denial letter
- Scholarship submission confirmation page

I understand that if I do not provide the above required information, I will not receive Tribal funding for the academic year.

I, the undersigned, have read, understand, and agree to abide by the terms and conditions the Higher Education Grant requirement.

Student Signature

Date