



Caddo Nation Education Department

P.O. Box 487 – Binger, OK 73009

405.656.2344

Fax: 405.656.2904

• *Dedicated To Your Success* •

PLEASE READ CAREFULLY

(Changes have been made)

This is the **Caddo Nation's Higher Education Program** (CNHEP) application packet. This application is used to apply for supplemental financial assistance to attend a college/university. To be considered for a scholarship, applicants must submit the application and as many of the documents listed below to the above address by the due date (Item 1), with the exception of the *Official Transcript and Verification of Enrollment*. A single asterisk (*) indicates the form is included in the packet.

Required Documents: **ALL DOCUMENTS MUST BE ORIGINALS! Faxes/Copies Will Not Be Accepted.**

1. Due Dates: Fall-July 15th, Spring-November 15th: All students must submit an application at the beginning of the academic year (Fall term). If the applicant will be attending the same school for the academic year, it is not necessary to submit a new mid-year application, but an Official transcript showing grades for the Fall term, and a Verification of Enrollment for the Spring term will need to be submitted before the applicant will be considered for a Spring term scholarship. If there are significant changes, such as transferring to another school, a new mid-term application will be required.
2. Copy of Caddo Nation Enrollment Card
3. *Completed & Signed Higher Education Application
4. *Student Agreement
5. *Student Background/Goals, Publicity Consent
6. *Consent to Release Information
7. **Once an applicant has reached the age of 18 years, a notarized statement, signed in ink, will be required to allow the CNHEP to conduct business with a third party that the applicant specifically designates, such as a parent/guardian. The statement must be on file before any information will be released. The statement can be revoked at any time by the applicant.**
7. *Financial Needs Analysis (FNA) form completed, signed & submitted by school Financial Aid Office. Student must complete the Free Application for Federal Student Aid (FAFSA) so this form can be completed. Scholarship amounts are dependent on the amount shown for "Unmet Need". A scholarship will not be awarded without a completed FNA.
8. Copy of Institutional Acceptance Letter (new students)
9. *Verification of Enrollment form, signed and stamped by school official. (Applicable to all students) Must be on file before scholarship will be released.
10. Official High School Transcript or GED Certificate -Applicable to new college students and new program applicants.
Official College/University Transcript - If the applicant has attended college before, an Official transcript will be required. **ONLY official school sealed transcripts will be accepted. Transcripts that are not in school sealed envelopes will not be accepted.**
11. Only completed applications (with all requested documentation) will be considered for funding.
12. In accordance with the accountability required for the administration of the funds appropriated for this program, certain information is required of the applicant. The intent of the collection and maintenance of this data is for determining the eligibility of the applicant and to provide the means for producing certain statistical records required of this office.
13. **Failure on the part of the applicant to provide the required information will preclude the applicant from eligibility in obtaining higher education assistance under this program. *It is your responsibility to make sure that all documentation for your application is complete.***

PRIVACY STATEMENT

THE FAMILY EDUCATIONAL RIGHTS
AND PRIVACY ACT (FERPA)
(20 U.S.C 1232G; 34 CFT PART 99)
IS THE FEDERAL LAW THAT PROTECTS
THE PRIVACY OF STUDENT EDUCATION RECORDS.

THE LAW APPLIES TO RECIPIENTS WHO
RECEIVE FEDERAL FUNDING
FOR EDUCATIONAL PURPOSES.

THESE RIGHTS TRANSFER TO THE STUDENT WHEN HE
OR SHE REACHES THE AGE OF 18 OR ATTENDS
A SCHOOL BEYOND THE HIGH SCHOOL LEVEL.

**WITH THIS STATED AND IN
ACCORDANCE WITH THE FERPA,
THE CADDO NATION
EDUCATION DEPARTMENT
WILL DISCUSS
STUDENT INFORMATION
WITH THE STUDENT
APPLYING FOR ASSISTANCE ONLY.**

Caddo Nation Higher Education Grant Application

NEW APPLICATION RENEWAL APPLICATION

Applying for: Academic School Year 20____/20____ – Fall Spr

Part I – Applicant Information: (PLEASE COMPLETE ALL BLANKS)

Name: _____
Last First MI (Maiden name)

Home Address: _____
Street No./ Route/PO Box City State Zip

SSN: _____ DOB: _____ Caddo Membership No: _____

Home Phone No. _____ Cell Phone No. _____ E-mail _____

Marital Status: Single Married Divorced Separated

Dependent # ____ Veteran: Yes No

Part II – Academic Information: (PLEASE COMPLETE ALL BLANKS)

Graduated from High School : Yes No Year Graduated:____ Received GED: Yes No Year:____

Have You Attended College Before? Yes No If yes, please list name & address of college last attended:

Name Address City State Zip

Semester & Year of Last BIA/Tribal Grant Received: _____ Last Name Used: _____

Current College/University: _____
Name Address City State Zip

Current Financial Aid Office Telephone Number: _____
Area Code/Telephone No.

Your Current Status: New Student Continuing Student

Classification: Freshman Sophomore Jr. Sr. Other Accumulative Hrs. _____

Major: _____ Minor: _____ Expected Graduation Date: _____

Degree Sought: AA AS AAS BA BS Other _____

Residential Status: On-Campus Off-Campus Commuter At Home Commuter

Your Address At School: _____
Street No./ Route/PO Box City State Zip

I declare information given by me on this form is true, correct and complete to the best of my knowledge. I consent to this information being shared by the Caddo Nation, my selected higher education institution, and other necessary agencies to complete my financial aid package. I will contact the Financial Aid Office and apply for any financial aid available to me, and if granted assistance from the Caddo Nation, I am aware the scholarship will be mailed to my Financial Aid Office. I agree to use the funds only for my approved educational expenses.

Student Signature

Date

Tribal Membership Verification Request Form

Dear STUDENT:

Please provide this office with a copy of your caddo membership card OR complete this form to request a copy from the Tribal Enrollment Office. If you choose to request a copy from the Tribal Enrollment Office, complete this form and sent it to:

Caddo Nation
Enrollment Department
P.O. Box 487
Binger, OK 73009

Dear ENROLLMENT DEPARTMENT:

Please provide the Caddo Nation Education Department with a copy of my membership card, which is a requirement for my Caddo Nation Higher Education Grant Program application.

My information is as follows:

NAME: _____

ADDRESS: _____

CITY _____ STATE _____ ZIP _____

TRIBAL ROLL #: _____

DATE OF BIRTH: _____

SOCIAL SECURITY #: _____

SIGNATURE DATE

PARENT/GUARDIAN SIGNATURE (IF STUDENT IS A MINOR) DATE



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CADDO NATION HIGHER EDUCATION GRANT PROGRAM STUDENT AGREEMENT

I, _____, agree to abide by all of the Caddo Nation Higher Education Grant Program rules, regulations and policies.

I will submit timely grade reports, as issued by the college or university for each term funded to the Caddo Nation Education Department.

If I do not meet academic requirements, I will be placed on academic probation for the following academic term.

While on academic probation, I must complete 12 or more semester hours with a GPA of 2.0.

I understand that failure to meet academic requirements shall result in suspension from the Caddo Nation Higher Education Grant Program.

I understand that students suspended from the Caddo Nation Higher Education Grant Program shall not be considered for future funding until they have: (1) utilized other funding sources for one semester of enrollment, and (2) completed a minimum of 12 credit hours for one semester of enrollment with a GPA of 2.0.

In the event I withdraw from classes or from college, I will immediately notify the Caddo Nation Education Department in writing, and understand that I may be placed on probation or suspended from the Caddo Nation Higher Education Grant Program by doing so.

I also understand that persons submitting or causing to be submitted any false information in connection with any application, report, or other document, upon which the provision of Federal financial assistance or any other payment of Federal funds is based, may be subject to criminal prosecution under provisions such as sections 287, 371, or 1001 of title 18, U.S. Code.

I UNDERSTAND THE CONTENTS OF THIS AGREEMENT AND ACCEPT ALL OF THE ABOVE CONDITIONS.

Student's Signature

Date

STUDENT BACKGROUND/GOALS

Please read and answer each question to the best of your ability.

1. Why did you choose to continue your education?
2. Why did you choose the college you are wanting to attend?
3. Who influenced you to go to college or continue your education?
4. Are you a first generation college student in your family?
5. When is your anticipated graduation date? What is your degree program and field of study?
6. What educational goals have you set for yourself and what is your intent after you've reached those goals?
7. Many times our students have an opportunity to return to the Caddo Nation to bring their knowledge and expertise. Would you be willing to do so?

Publicity Consent

I agree to allow my name and likeness to be used for positive promotion of the Caddo Nation Education Program. This usually includes carefully selected photos, but is not limited to photos. Photos may be selected to be used in the Caddo Nation Education Department's section of the tribal web page, newsletter, brochure, or recruitment videos. Sensitive information, such as social security numbers, will never be released to the public. All photos are carefully selected to portray students in a positive academic, cultural, or recreational setting.

BY SIGNING BELOW, I AGREE TO CONSENT, AND FULLY UNDERSTAND THE CONTENTS OF THIS STATEMENT.

Student's Signature

Date

FINANCIAL NEEDS ANALYSIS FORM

Part 1 – To Be Completed by Student (PLEASE COMPLETE ALL BLANKS)

(Print) Name: _____ SSN: _____
Last First MI

Address: _____
St. No./Route/POB City State Zip

Marital Status: _____ No. of Dependents: ____ Classification: (Circle appropriate number) 1. Fresh. 2. Soph. 3. Jr. 4. Sr. 5. Other

College/University: _____
Name Address City State Zip

Authorization for Release of Information

I authorize the above college/university to release this Financial Needs Analysis Form, when completed, to the Caddo Nation Education Department.

Student Signature Date

Student: Please do not make any marks below this point and submit to your school's Financial Aid Office when completed, signed and dated.

Part 2: To Be Completed by Financial Aid Administrator/Counselor (PLEASE COMPLETE ALL BLANKS)

___ Student applied for financial aid for the current academic year.

___ Student has not applied for financial aid. Need cannot be determined.

___ Student's application is incomplete and cannot be considered.

Applicant is: (Circle appropriate number) 1. Full-time 2. Part-time. Applicant is enrolled in how many hours? _____

BUDGET PERIOD: From _____ To: _____ Start Date: _____

-----College Expenses-----	-----Resources/Awards/Scholarships-----
Tuition \$ _____	Parental \$ _____ Pell Grant \$ _____
Fees \$ _____	Student/Spouse \$ _____ SEOG \$ _____
Room/Board \$ _____	Student Incentive Grant \$ _____ CWS \$ _____
Books \$ _____	College/Univ. Scholarship \$ _____ Stafford loan \$ _____
Travel \$ _____	Federal SLS \$ _____ Perkins loan \$ _____
Misc. \$ _____	College/Univ. funded loan \$ _____ Plus loan \$ _____
Personal \$ _____	Veteran's Asst. \$ _____ Tuition Waiver \$ _____
Child Care \$ _____	Other (i.e. EFC) \$ _____
Other \$ _____	Dir. Tribal Asst. \$ _____
TOTAL \$ _____	TOTAL \$ _____

Total Expenses \$ _____ Total Resources, Awards & Scholarships: \$ _____

Student's unmet need is \$ _____ Unmet Need = (Expenses – [Resources + Awards & Scholarships])

This office recommends the Caddo Nation awarding the student \$ _____. Please Note: If the student is eligible for a grant, we will send the award to the Financial Aid Office at the address below.

Signature of Financial Aid Officer Date Phone Number

College/University Address City/State/Zip

Financial Aid Administrator: Our established deadline dates are July 15th for Fall & November 15th for Spring. However, we hope your office will return this form completed, to the best of your ability, at your earliest convenience regardless of the date. Our address is: Caddo Nation Education Dept., P.O. Box 487, Binger, OK 73009



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VERIFICATION OF ENROLLMENT

DEAR COLLEGE/UNIVERSITY OFFICIAL: This form, complete with your original signature, is required to be in the Caddo Nation Education Department before the student's grant check can be mailed to your institution's Financial Aid Office. To authenticate this verification process, please affix your institution's seal or stamp in the space provided and mail it to the Caddo Nation Education Department at your earliest convenience.

If your institution provides an Official Verification of Enrollment form/letter, or one is provided through a Student Clearinghouse, please send such forms directly to the Caddo Nation Education Department.

Student's Signature Student's Printed Name Student ID #

The above student is enrolled for the academic term: _____ at:

(Name of Institution, address, city, state, zip)

This document certifies that the above named student is:

A. _____ Enrolled full-time carrying _____ semester hours.

B. _____ Enrolled part-time carrying _____ semester hours.

I certify the information provided above is accurate according to our admission records.

Signature of Registrar/Admissions/Counselor

Printed name for above signature

Date

Please place
school stamp or seal
here

