

TOLOWA DEE-NI' NATION
12801 Mouth of Smith River Rd
Smith River, CA 95567-9525
TEL (707) 487 – 9255

EDUCATION FUNDING APPLICATION

Name: _____ Social Security Number: _____ - _____ - _____
 First Middle I. Maiden Last

Address: _____
 Physical address Mailing address City State Zip Code

Email address _____

Telephone # (____) _____ - _____ Sex _____ Date of Birth _____

Are you a high school graduate? Yes No Year graduated _____; or do you have a GED or have you passed a high school equivalency test?

Major Field of study: 1st _____ 2nd _____

Expected graduation date: _____ Date expected to start school: _____

Name and Address of School: _____

Have you already spoken with someone at the school? yes _____ No _____

Name: _____ Title: _____ Tel# _____

Have you ever received Adult Vocational training, Higher Education or Direct Employment Assistance previously from the Bureau of Indian Affairs or Tolowa Dee-ni' Nation? _____

If yes, give the year and location of training: _____

Did you complete the training? _____ Name of Agency that funded you: _____

Signature: _____ Date: _____ / _____ / _____

*Have you, a family member, or spouse (of Tolowa Descent) served in the Military or armed forces? Yes No

Name: _____ Relationship to applicant: _____

Enlistment Date: _____ / _____ / _____ Discharge Date: _____ / _____ / _____

Branch/Unit: _____ Rank: _____ Medals/Honors: _____

TO BE INITIALED BY APPLICANT:

I hereby apply to attend the school indicated on this application and agree to follow all rules, regulations, and attendance requirements of the school and to the best of my ability will satisfactorily complete the courses, which I have selected. I further agree that funds issued to me for educational purposes by Tolowa Dee-ni' Nation will be so used for educational purposes. I agree that failure to do so, or failure to complete courses will result in reimbursement to Tolowa Dee-ni' Nation and or ineligibility in future use of Tolowa Dee-ni' Nation's Higher Education program.

(Initial) _____ Date: _____/_____/_____

PRIVACY ACT AND PAPERWORK REDUCTION ACT STATEMENT:

1. The authority for solicitation of the information on this form is 25 U.S.C. 13 (42 Stat. 208) and P.L. 84-959 (70 Stat.986) as amended by P.L. 88-230 (77 Stat. 471, 25 U.S.C. 309).
2. Disclosure of the requested information by the applicant is voluntary, but required to obtain benefit.
3. The purpose of this information collection is to determine your eligibility for services.
4. The routine use of this information is by BIA, SRR and school counselors to evaluate your request and to assist you before and during your education. The application will be used in a routine manner by counselors working with you who need background information and by those people involved in financial control who need budgeting information contained in the application.
5. Failure to provide requested information may result in a delay or denial in receiving educational assistance.

I have received and read the Higher Education Policies in its entirety; I have read, initialed and dated the above statement. I hereby provide the required information and authorize the use of such information to the extent of the uses specified in the statement. I declare under penalty of perjury that the foregoing is true and correct; by signing this document, I agree to the terms of Tolowa Dee-ni' Nation's Higher Education Program.

(Applicant Signature)

_____/_____/_____
(Date)

FOR TOLOWA DEE-NI' NATION AGENCY USE:

I certify that _____ is an enrolled member of Tolowa Dee-ni' Nation and his/her enrollment number is _____.

Approved By: _____

Title: _____

TOLOWA DEE-NI' NATION
110 W First Street
Smith River, CA 95567-9525
TEL (707) 487 - 9255
FAX (707) 487 - 0137

IMPORTANT STEPS

1. Apply for admission - Telephone, write or go to the admissions office, ask for an application for admission. Fill out and submit this application to the college at once.
2. Community College Placement Test - If you are attending college for the first time you should telephone the college and make an appointment to take the college placement test. This is important as the result of this test assists your college counselor to help you get started in college at the level most helpful to you.
3. Make an appointment at the counseling office to meet with a school counselor to begin planning for your course schedule.
4. Go to the financial aid office at the school you plan to attend and request a financial aid packet.
5. Register at the appropriate time. Go to the college and register for your classes; see the college catalog or ask your college counselor for the correct date.
6. Always keep in contact with Tolowa Dee-ni' Nation. If we do not know what you are doing or if you have not completed all your paperwork we cannot help you to obtain the training you desire.

