



Sitnasuak
Foundation



Bering Straits Foundation



Continuing SPANS

APPLICATION IS DUE BY THE DEADLINE INDICATED BY EACH ORGANIZATION. OFFICIAL TRANSCRIPTS AND CLASS ENROLLMENT ARE TO BE SENT IN AS SOON AS AVAILABLE TO THE PROPER SCHOLARSHIP ORGANIZATION.

INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED

Depending on availability of funds organizations will provide scholarships to CONTINUING STUDENTS each semester/quarter as long as the requirements stated on the original application are met. CONTINUING STUDENTS are defined as those that received a scholarship for the previous term and have maintained the GPA requirements for the previous term and the other requirements stated by each organization.

	BSF	Sitnasuak	Kawerak	NSEDC	NSHC
Required Documents					
Application, pages 2 & 3	Yes	Yes	Yes	Yes	Yes
Official Transcripts	Yes	Yes	Yes	Yes	Yes
Class Enrollment	Yes	Yes	Yes	Yes	Yes
Eligibility Requirements					
Must attend an <u>accredited</u> Vocational or College/ University Institution	Yes	Yes	Yes	Yes	Yes
Full-time Student (12 semester credits, 10 quarter credits, or 9 graduate credits)	Yes	Yes	Yes	Yes	Yes
Part-time Student	Yes	No	Yes	Yes	No
Terms Funded & Deadlines					
Fall Term Deadline	June 30	June 30	July 15	June 30	June 30
Spring Term Deadline	December 31	December 31	December 31	December 31	December 31
Vocational Training Deadline	2 week prior to start of class	Same as Fall & Spring	No Deadline	No Deadline	Same as Fall & Spring
Summer Term Deadline	April 15	No	Contact Kawerak	Contact NSEDC	No
GPA Requirements					
GPA minimum requirements for college or vocational training	2.0 for first semester; 2.5 for other semesters	N/A	2.0	2.0	2.5

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1. PERSONAL INFORMATION (Please provide the following, not all information is used by each agency.)

Applicant Name		Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth	Social Security #
Your Mailing Address While Attending School (if not known at this time please provide address ASAP)		Home/Permanent Mailing Address		
Your Phone # at School	Your Phone # at Home	Your Cell Phone #	Email Address	
Alternative E-mail	Facebook Login Name	MySpace URL	Other	

2. NAME OF THE SCHOOL YOU ARE ATTENDING, FINANCIAL AID OFFICE ADDRESS & PHONE #.

Name and financial aid address of school you will attend	Phone #	
	# of credits you will take	
	Expected Graduation Date	List the date enrollment will be sent
Area of Study (i.e. accounting, nursing, CDL, construction)	<input type="checkbox"/> Associate's <input type="checkbox"/> Certificate <input type="checkbox"/> Bachelor's <input type="checkbox"/> Vocational Training <input type="checkbox"/> Master's <input type="checkbox"/> Other _____ <input type="checkbox"/> Doctorate	
I am will be enrolling as a: <input type="checkbox"/> Freshman (0-29 credits) <input type="checkbox"/> Sophomore (30-59 credits) <input type="checkbox"/> Junior (60-94 credits) <input type="checkbox"/> Senior (95 plus credits) <input type="checkbox"/> Graduate <input type="checkbox"/> Vocational Training Student		
Term applying for 20_____ Spring _____ Winter _____ Fall _____ Summer _____ Other _____		
The school operates on <input type="checkbox"/> Semester <input type="checkbox"/> Quarter <input type="checkbox"/> Trimester <input type="checkbox"/> Vocational Training Sessions First day of instruction: _____ Last day of instruction: _____		

3. ACADEMIC INFORMATION

Most recent GPA <input type="checkbox"/> High School (complete in section below) Semester _____ Cumulative _____ <input type="checkbox"/> College Total # of Credits Earned _____ <input type="checkbox"/> Vocational Training		
Name and address high school graduated from	Year of Graduation	<input type="checkbox"/> High School Diploma <input type="checkbox"/> GED
	High School GPA _____ or GED Score _____	Last grade completed <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12

4. FINANCIAL INFORMATION

RESOURCES	Received/Expected	Applied/Pending
Bering Straits Foundation		
Kawerak, Nome Eskimo Community, Gambell (BIA scholarships)		
Norton Sound Economic Development Corporation		
Norton Sound Health Corporation		
Regional/Village Corporation		
College Scholarships (academic, athletic, etc.)		
National Guard/Military Benefits		
State of AK DOL (STEP/WIA)		
Free Application for Federal Financial Aid (FAFSA) /Pell Grant		
Loans (specify)		
Employment (part or full time)		
Other (specify)		
Self		
TOTALS	\$ _____	\$ _____
EXPENSES		
Tuition		
Fees		
Books		
Supplies		
Meals		
Room		
Transportation		
Miscellaneous		
TOTALS	\$ _____	
	Term with only received/expected amounts included	
TOTAL BALANCE NEEDED (Resources - Expenses)	\$ _____	

5. STATEMENT OF UNDERSTANDING

I hereby attest that the information contained in this application is true, correct, and complete. The scholarship award(s) will be used to further my education for the program I have enrolled in. I understand that the funds must apply toward tuition, registration fees, books and campus related room and/or board expenses. I understand that any unspent funds will be returned. **I further understand that immediately upon completion of the term that I received scholarships for I will submit an official transcript.** I give permission for Bering Straits Foundation, Norton Sound Economic Development Corporation, Kawerak, Norton Sound Health Corporation and/or Sitnasuak Foundation to publish my name, photo, school information, or other information I provide in any reports, press releases or publications; and they may share information I provide with each other.

Signature

Date