INSTRUCTIONS TO APPLICANTS

1. IMPORTANT: Please read all application materials thoroughly before completing this application. Applications that are incomplete or unsigned will not be reviewed.

2. GENERAL INFORMATION: NASF’s objective is to recognize and reward outstanding student achievement. This supplemental award is intended to help American Indian students of any age, from any U.S. tribe, and in any State, striving to get an education. All awards are based on merit, academic achievement and ambition.

3. DEADLINES: It is the applicant's sole responsibility to meet all final deadlines of NASF. Missing material due to failure by others to meet final deadlines will cause your application not to be processed. It is the sole responsibility of the applicant to follow up and ensure that NASF receives valid documents on or before designated deadlines. NO EXCEPTIONS TO THIS RULE.

<table>
<thead>
<tr>
<th>Important Deadlines</th>
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<tbody>
<tr>
<td>Summer Session</td>
<td>March 15</td>
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<tr>
<td>Fall Semester/Autumn Quarter</td>
<td>April 15</td>
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<tr>
<td>Spring Semester/Winter Quarter</td>
<td>September 15</td>
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4. FUNDING: Because we are a supplemental aid program, applicants are required to apply for all other sources of funding for which they are eligible; this includes applying for campus-based aid. This is an iron-clad requirement; applicants who do not apply for all other sources of funding will not have their application forwarded to the Board of Directors for reading and ranking. We recommend that applicants look through private scholarship directories for information on over 100,000 scholarships, grants, loans, and internships. A wide range of corporations, unions, trust funds, religious and fraternal organizations, associations, and private philanthropists can provide you with the financial assistance you need to continue your education.

5. AWARDS: Scholarships are on a competitive basis. Awards are based on NASF’s projected income. Awardees will be notified by letter as early as possible.

6. Please type all materials: Do not staple, bind, or clip any part of the application—leave it loose leaf. Submit all documents on standard size paper (8-1/2” x 11”). Documents should be placed in the order as specified on page 2 of the application. Do not place labels or dividers in application. Use extra pages if necessary. DO NOT LEAVE BLANK SPACES. Failure to supply the requested information may preclude an applicant from being eligible for assistance under this program.

7. PROCESSING FEE: A non-refundable $10.00 processing fee must accompany each application.

8. Completion of this application will determine your eligibility. Students never funded by NASF are considered new students. Continuing students (those who are currently funded by NASF) do not have to reapply or pay a $10.00 processing fee. Instead they will automatically receive a Scholarship Renewal Form that must be completed by June 1st. NASF does not place a maximum limit on the number of terms/semesters for funding. We consider our scholarships "lifetime" awards. Therefore, it is in your best interest to make time and a sincere effort to complete the application in its entirety.

FAXED APPLICATIONS AND/OR DOCUMENTS WILL NOT BE ACCEPTED.
**ACCOMPLISHMENTS:**

Let us see what you have done in the last few years. Please explain your experience in the following areas:

- **Service:** In which community or educational institutions have you volunteered?
- **Leadership:** What leadership positions have you held or what leadership qualities do you possess?
- **Academic:** What are your grades, test scores, honors, and awards?

**BACKGROUND:**

The following areas should be addressed in the letter of recommendation:

- **School:** What is your school like?
- **Community:** What is your community like?
- **Special Interests:** What are your special interests?
- **Personality:** What are your personality traits?

**LETTERS OF RECOMMENDATION OUTLINE**

1. **Academic Adviser:** A teacher, advisor, employer, professor, etc.
2. **Community Leader:** A leader in your community or school.
3. **Personal Friend:** A close friend or family member.

Please send the letters of recommendation to NASP by the following date:

**LETTERIS DUE:** 15th March 2023

**IMPORTANT:** Your essay must be typed.

**YOUR ACHIEVEMENTS:**

Explain why you are applying for the American Scholarship Fund. Describe your experience and why you think you should receive a scholarship. Include any other information that will help us understand your application. Please mention your academic achievements and any other relevant experiences.

**LEADERSHIP AND SCHOLARSHIPS:**

Describe any leadership or scholarship opportunities you have pursued and how you have benefited from them.

**SERVICE TO INDIA:**

Describe your plans to work with and benefit Indians.

**CAREER PLANS:**

Describe your plans for your career after college.

**LETTER OF RECOMMENDATION:**

Please introduce yourself using your full name and your

**ESSAY OUTLINE:**
FINANCIAL NEEDS ANALYSIS

PART I: TO BE COMPLETED BY THE STUDENT
(Send form to college/university financial aid office for completion)

STUDENT NAME: ___________________________ SOC. SEC. NO: ________________

ADDRESS: ________________________________________________________________

CITY: ___________________________ STATE: _______ ZIP: __________

COLLEGE/UNIVERSITY: _______________________________________________

FUNDING REQUEST FOR: FALL '9__ [FT/PT] SPRING '9__ [FT/PT] SUMMER '9__ [FT/PT]

I hereby give permission to the Native American Scholarship Fund, Inc. to request and receive any information on my financial aid status and academic progress. I understand that I must apply to all federal, state, private, and institutional aid before being considered for NASF aid. I also understand that I am responsible for seeing that this form reaches the NASF by the deadline dates.

Student Signature __________________________________________ Date ____________

PART II: TO BE COMPLETED BY FINANCIAL AID OFFICER
(Return to the Native American Scholarship Fund, Inc.)

COLLEGE NAME: ___________________________________________

ADDRESS: _______________________________________________________

CITY: ___________________________ STATE: _______ ZIP: __________

EXPENSES:

Tuition & Fees $________________
Books & Supplies $________________
Room & Board $________________
Transportation $________________
Personal $________________
Other (Specify) $________________

TOTAL EXPENSES: $________________

RESOURCES:

Personal $________________
Misc. Scholarships $________________
BIA Scholarship $________________
Tribal Scholarship $________________
Grants (PELL, etc.) $________________
Loans (PERKINS, etc.) $________________
Work Study $________________
Veteran's benefits $________________
Other (Specify) $________________

TOTAL RESOURCES: $________________

Has student been suspended from financial aid for failure to maintain satisfactory progress? YES or NO

If yes, when? ___________________________ Has student applied for financial aid? YES or NO

Print name of person completing form: ___________________________

Signature of person completing form: ___________________________

Title: ___________________________ Phone No.: __________________ Date: __________

Contributions are tax deductible • Made from recycled paper
CERTIFICATE OF INDIAN BLOOD REQUEST FORM

PART I: STUDENT

To be considered for an NASF scholarship, you must: Be an enrolled member and possess 1/4 degree or more American Indian blood from a federally recognized, state recognized, or terminated U.S. tribe.

Complete Part I and send form to your tribal enrollment agency or office (Bureau of Indian Affairs Agency). A CIB received directly from the tribal enrollment office is verification that the form was officially completed. A CIB submitted by the applicant is not valid. Copies or any other documents are NOT ACCEPTED.

SSN: ___________________________ Maiden Name: ___________________________

Last Name: ___________________________ First Name: ___________________________ Middle Initial: (MI): __________

Date of Birth: ___________________________ Place of Birth: ___________________________ Sex: ______

Mother’s Maiden Name: ___________________________ Father’s Name: ___________________________

Current Mailing Address:__________________________________________________________

City: ___________________________ State: ______ Zip: ______

“I hereby authorize the release of tribal information relating to my tribal enrollment to the Native American Scholarship Fund for use in obtaining a scholarship.”

Applicant’s Signature ___________________________ Date ___________________________

******************************************************************************************

PART II: TRIBAL ENROLLMENT OFFICER

Students applying for a scholarship from the Native American Scholarship Fund must provide an official Certificate of Indian Blood. NASF is requesting verification of tribal affiliation from your office. This certificate must be date stamped and embossed with tribal seal to validate that certificate was completed at the Tribal Enrollment office. Completed certificate must be mailed from the tribal office directly to NASF. The Certificate of Indian Blood cannot be FAXED to meet deadlines. NO EXCEPTIONS.

Tribe: ______________ Degree of Indian Blood: ______________

Census/Enrollment No: ___________________________ Is applicant an enrolled member? ______ Yes ______ No

Is this U.S. Tribe: ______ Federally recognized ______ State recognized ______ Terminated

Comments: __________________________________________

Signature: __________________________________________ Date: ______________

Title: ______________ Business Phone No.: _______________

Address: __________________________________________ City/State/Zip: __________________________

TO TRIBAL ENROLLMENT OFFICE: MAIL THIS FORM DIRECTLY TO NASF AT ADDRESS BELOW. THANK YOU.

8200 Mountain Road N.E., Suite 203, Albuquerque, NM 87110 • (505) 262-2351 • fax (505) 262-0534

Contributions are tax deductible • Made from recycled paper
APPLICATION FORM (MUST BE TYPED)  NATIVE AMERICAN SCHOLARSHIP FUND, INC.

8200 Mountain Road NE, Suite 203 • Albuquerque NM 87110 • 505-262-2351

SSN: ___________________________ Term Applying for: Fall/Autumn 19____ Spring/Winter 19____ Summer 19____

Last Name: ___________________________ First Name: ___________________________ MI: ______ Sex: ______

Birthdate: ___________ Place of Birth: ___________________________ Tribe: ___________________________ Blood Quantum: ______

CURRENT MAILING ADDRESS:

________________________________________________________________________

City: ___________________________ State: ______ Zip: ______

Home Phone (Area Code): ___________________________

Name of University you will attend: ____________________________________________

City: ___________________________ State: ______ Zip: ______ Phone No. (Area Code): ______

College Level: ______ Freshman ______ Sophomore ______ Junior ______ Senior ______ Graduate ______ Post Graduate

Degree Objective (circle one): BA / BBA / BS / MA / MS / MBA / MSW / JD / MD / LPN / RN / DC / DPM / DVM / DDS

DO / Ed.D. / Ph.D. / Psy.D. Other: _______ Field of Study: ___________________________ Graduation Date: ______

Name, City/State of high school attended: ___________________________________________ Graduation Date: ______

High school GPA on 4.0 scale: ______ High school class rank: ______ College GPA on 4.0 scale: ______

College entrance test scores: ACT (Composite): ______ %ile: ______ SAT Verbal: ______ %ile: ______ Math: ______ %ile: ______

Other Test Name (LSAT/MCAT/MAT/GRE/etc.): ___________________________ Test Score: ________ Percentile: ______

Military Veteran: Yes ______ No ______ Branch of Service: ___________________________ Dates of Military Service: From: ______ to ______

Marital Status: ______ Single ______ Married ______ Divorced ______ Widowed ______ Separated ______ Single Parent ______

Are you listed as a dependent on your parent’s/guardian’s federal tax return for the most recent tax year? ______ Yes ______ No ______

Number of dependent children residing with you: ______ CHILDREN’S NAMES ______ AGES ______

Number of persons in household: ______

List courses and grades in your major field of study (Please list high school grades if you are about to enter college):

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<th>COURSE TITLE/GRADE</th>
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Explain the relevance of the courses you have taken to you; planned career: ____________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
List all information which would give an indication of your success in your chosen field. (Use additional page if necessary):

Awards/Honors earned in high school and/or college:

Membership/Leadership Roles:

Volunteer/Community efforts:

Submit copies of all sources of funding to which you have applied, or to which you plan to apply. A minimum of ten (10) sources is required. (Use additional page if necessary).

SOURCES

ADDRESS

DOCUMENTATION: The following documents are required by NASF for the review process. It is the sole responsibility of the student to have all required documents submitted to NASF by the final deadlines. Place documents in the following order:

A. Financial Needs Analysis. Original must be submitted by your Financial Aid Officer.
B. A copy of your college’s cost bulletin (Student Tuition and Fees).
C. A copy of the IRS 1040 Federal Tax Return (Student’s or Parent’s) for the previous year.
D. Certificate of Indian Blood (CIB) [Proof of your enrollment with a federally recognized, state recognized, or terminated American Indian tribe. CIB must show your blood quantum].
E. Copies of applications and/or responses for other sources of funding. (Minimum of 10 sources required).
F. An essay explaining your goals in life, college plans, career p’-... One page is insufficient. Be thorough.
G. Three Letters of Recommendation. Writers of LOR should submit letters directly to NASF.
H. Official Transcripts: 1) Incoming Freshmen must submit final high school transcript; 2) Undergraduates must submit transcript for previous college work completed; 3) Graduates must submit undergraduate transcript.
I. A copy of Standardized Test Scores (ACT/SAT/GRE/MCAT/LSAT, etc).
J. DD 214 Form (military personnel).
K. Copy of Letter of Admission from an accredited college/university, or graduate school and degree program.
L. Processing Fee: $10.00 non-refundable (Money Orders or Personal Checks only. No Cash please).
M. Photograph (2” x 3” photo must be of good quality for use in NASF newsletters and/or publications).

CERTIFICATION: I hereby certify that information on this application is true, correct and complete to the best of my knowledge. I consent to the release of this information to other agencies and persons as necessary to determine my eligibility. I understand that any scholarship awarded to me will be disbursed as money becomes available to the Native American Scholarship Fund, Inc. (NASF). I also understand that I will be included in the NASF Directory of Graduates, and that my name, address, and phone number may be released for other possible scholarship sources, job prospects and opportunities related to my education and/or career. I also understand that NASF may release my name and photograph in any news releases and/or publications. If awarded a scholarship from the Native American Scholarship Fund, Inc., I agree to comply with all rules applicable to the award.

Student’s Signature   Date   Parent’s Signature (If student is under 18 years)   Date