

CHICHILTAH CHAPTER SCHOLARSHIP POLICY & PROCEDURES

FISCAL YEAR 2023

EMAIL: chichiltah@navajochapters.org

PHONE: (505) 713-9994 / 5137

NAME: _____ UNIT#: _____

COLLEGE ATTENDING: _____

REQUIRED DOCUMENTS FOR FIRST (1ST) YEAR STUDENT:

- ___ Scholarship Financial Assistance Application
- ___ Copy of Social Security Card
- ___ Copy of Certificate of Indian Blood (CIB)
- ___ Copy of Photo Identification Card (ID)
- ___ Copy of Navajo Nation Voter Registration
Verified 2023 Active Voter Listing by Staff: _____
- ___ High School Transcript
- ___ Current Class Schedule for Semester of Application
- ___ Current, original – Letter of Acceptance from the Institution
- ___ U.S. Citizens, 18-25, MALE applicants are required to register with Military Selective Services.

REQUIRED DOCUMENT FOR RETURNING STUDENT:

- ___ Unofficial Transcript
- ___ Current Class Schedule for Semester of Application
- ___ Current Degree Plan from Student Advisement
- ___ Current original Letter of Acceptance from the Institution
- ___ U.S. Citizens, 18-25, MALE applicants are required to register with Military Selective Services.

CSC COMMENT:

AMS COMMENT:

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I. PURPOSE

To provide an opportunity for registered Chapter members to pursue a higher education, based on availability of funds.

1. \$700.00 – Fall & Spring Semester
2. \$500.00 – Summer Semester

II. POLICY AND PROCEDURES

1. All applicants shall adhere to the Chichiltah Chapter Scholarship policy and procedures.
2. Completed Scholarship Application will be accepted by Email or Postal Mail which must be postmarked by the set deadline date.
3. Chichiltah Chapter Scholarship application packets shall be reviewed and updated on an annual basis.
4. Chapter Administration shall safeguard all documents and file according to the Five Management Systems and Navajo Nation Privacy Act.
5. Chichiltah Chapter is open to innovative ideas to improve our policy and procedures for financial assistance. Written recommendation or suggestions can be submitted to the Chapter administration office.

III. ELIGIBILITY

1. Applicant(s) attending full-time, part-time, on-line, enrolled in college, university, vocational, Technical college is eligible for assistance.
2. Applicant(s) shall provide ALL the documents listed on the Required Checklist for EACH Semester applied for:

Scholarship Financial Assistance Application

Copy of Social Security Card

Copy of Certificate of Indian Blood (CIB)

Copy of Photo Identification Card (ID)

Copy of Navajo Nation Voter Registration

(Verified 2023 Active Voter Listing. Verified by Staff: _____)

Unofficial Transcript for Returning College Applicant

Current Class Schedule for semester of Application

Current Degree Plan from Student Advisement

Current, original Letter of Acceptance

U.S. Citizens, 18-25, MALE applicants are required to register with Military Selective Services.

IV. PROCESS

1. The applicant shall complete the application and submit to the Chapter administration office by deadline date, which will be logged in by the staff.



Chichiltah Chapter Financial Assistance APPLICATION

Term(s) applying for:

- 20__ Fall
- 20__ Winter/Spring
- 20__ Summer (only)

Send documents to:

Chichiltah Chapter PO Box 1436 Gallup, NM 87301

website: chichiltah@navajochapter.org

PLEASE PRINT LEGIBLY AND COMPLETE ALL APPROPRIATE INFORMATION

Date:		Applicant Name: (Last) (First) (Middle Initial) (Maiden Name)			
SSN:		Are you a Veteran: <input type="checkbox"/> Yes <input type="checkbox"/> No Handicapped/Disabled? <input type="checkbox"/> Yes <input type="checkbox"/> No		Phone No.(s): HM: WK:	
Mailing Address: If mailing address changes, Please contact Chichiltah Chapter Immediately & provide new address					
City:		State:		Zip Code:	
Email Address:					
Census No.:		Date of Birth:	Marital Status:	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	
No. of Dependant(s):		Parent/Guardian Name and Address:			
High School or G.E.D Center: (Name and Location)				H.S. Diploma or GED Received: Month/Year _____/_____	
Type of High School You Graduated From: (check one) <input type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> BIA <input type="checkbox"/> Tribal Contract <input type="checkbox"/> Secular <input type="checkbox"/> G.E.D <input type="checkbox"/> Grant					
College or University You Will Attend: (City, State, Zip)				Type of Term: (check one) <input type="checkbox"/> Semester <input type="checkbox"/> Quarter <input type="checkbox"/> Trimester	
Type of Degree you will earn while attending college (circle one)		Diploma or Certificate	Associates A.A. / A.S. / A.A.S.	Bachelors B.A. / B.S.	Masters M.A. / M.S.
Doctorate Ed.D. / M.D. / Ph.D. / J.D					
College Classification: (check one) <input type="checkbox"/> Freshman <input type="checkbox"/> Sophomore <input type="checkbox"/> Junior <input type="checkbox"/> Senior <input type="checkbox"/> Graduate <input type="checkbox"/> Post-Graduate <input type="checkbox"/>					
Undergraduate/Graduate: (required information) Major:				Anticipated Date of Graduation: Month/Year _____/_____	
Graduates Only: (required information) Program or Department Accepted into:				Anticipated Date of Graduation: Month/Year _____/_____	
My enrollment status will be: (please check one) <input type="checkbox"/> Undergraduate Full Time <input type="checkbox"/> Graduate Full Time <input type="checkbox"/> Part-Time (less than Full-Time) 11 credit					
Have you received a Navajo Nation Scholarship before: <input type="checkbox"/> Yes <input type="checkbox"/> No			If yes, when and what institution:		

Pursuant to Chichiltah Chapter, You must Sign and Date this Contract

If and when this application is approved, I _____ shall accept and abide by the conditions stipulated in the terms above and will be bound by the responsibilities and consequences thereof and give permission to Chichiltah Chapter to receive my transcripts and financial information, and hereby acknowledge the policies and procedures.

_____ Date

_____ Student Signature

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1. The Account Maintenance Specialist (AMS) will review the application to ensure all supporting documents are attached and will forward the application to the Chapter Services Coordinator (CSC) for approval or disapproval.
2. An incomplete application will be VOIDED on deadline date.
3. Applications meeting all the required documents will be forward to the Chichiltah Chapter, Regular Meeting, for approval by community members.
4. Upon submittal of the Chapter Meeting Minutes, the AMS will process checks based on the availability of Chapter fund.
5. Grade Point Average (GPA) lower than 2.0 will not be funded.
6. Checks not picked up in ten (10) working days will be postal mailed.
7. The CSC, AMS or Office Assistant will NOT contact you to remind you too submit ALL documents on the application checklist. This is the applicant's responsibility.

V. DEADLINE DATES:

Spring Semester:	November 30	4:00 PM
Summer Semester:	March 30	4:00 PM
Fall Semester:	June 30	4:00 PM

VI. PROBATION

1. An applicant who fails to complete the semester for which he / she registered.
2. Withdrawing from the institution.
3. GPA lower than 2.0 Probation period shall be in effect until the applicant provides a transcript of 2.0 GPA or higher.

Applicant Acknowledges that he/she has read the Chichiltah Chapter Scholarship Assistance Policy and Procedures.

NAME

DATE