NORTH DAKOTA INDIAN SCHOLARSHIP
2020/21 - Needs Analysis Form, Certification of Admission and ND Residency

This form must be returned by July 15 for priority award consideration. ALL PARTS ARE REQUIRED! Parts 1 must be certified by the financial aid office at your college. Parts 2-3 may also be certified by the financial aid office, or by another authorized representative of your college. You must complete, sign and date in Part 4.

Please send completed form via secure Drop Box, Fax or Mail: ND Indian Scholarship Program
ND University System (NDUS)
600 E Boulevard Ave Dept. 21
Bismarck, ND 58505-0602
Fax: 701-328-2979
PREFERRED: Upload using the NDIS Secure Drop Box: https://sendfiles.ndus.edu/filedrop/indianscholarship

**PART 1 (COLLEGE FINANCIAL AID OFFICE COMPLETES) - NEEDS ANALYSIS FORM:**

Please request that the financial aid office complete Part 1, or you may provide an award letter, shopping sheet, or other adequate substitute needs analysis, with all of the information listed.

<table>
<thead>
<tr>
<th>NEEDS ANALYSIS</th>
<th>Fall 2020</th>
<th>Spring 2021</th>
<th>Summer 2021</th>
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<tbody>
<tr>
<td>Cost of Attendance (COA)</td>
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<tr>
<td>Financial Aid Resources (exclude loans)</td>
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<td>Expected Family Contribution (EFC)</td>
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<tr>
<td>Financial Need (COA-Resources-EFC)</td>
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</table>

Part 1 completed by (name/title/office):
(Required if no alternative needs analysis form is provided.)

**PART 2 (COLLEGE COMPLETES) - CERTIFICATION OF ADMISSION:** You have two options to verify admission. You may either request a letter of admission from your college, or you may have the appropriate office at your college, such as the financial aid, registrar or admission’s office, complete the following.

☐ I am attaching a copy of my admission letter.
-OR-
☐ I am requesting that my college certify my admission below.

I certify that ____________________________________________________________ is accepted for admission

at ____________________________________________________________.

Name/Title (printed) of person certifying admission    Date

Signature of person certifying admission

**PART 3 (COLLEGE COMPLETES) - CERTIFICATION OF NORTH DAKOTA RESIDENCY:** Residency for the purposes of the ND Indian Scholarship is determined by the institution. Please have the appropriate office at your college, such as the financial aid or registrar’s office, complete the following.

I certify that ____________________________ is a resident of North Dakota

☐ IS    ☐ IS NOT

I certify that ____________________________

Name/Title (printed) of person certifying residency    Date

Signature of person certifying residency

**PART 4 - APPLICANT CONSENT/CERTIFICATION** I give my consent for my college to release financial aid, enrollment and residency information, which is required to complete my application for the ND Indian Scholarship. I certify that the information provided on this form has been completed by an authorized representative of my college and is true, correct, and complete to the best of my knowledge.

I have completed the 2020-21 FAFSA Application:    YES ☐    NO ☐

APPLICANT NAME (please print)    APPLICANT SIGNATURE    DATE