

**NATIVE AMERICAN SCHOLARSHIP
2023-24 APPLICATION**

PRIORITY DEADLINE: All application materials must be **received** by the North Dakota University System no later than **JULY 15, 2023, for priority consideration.**

Incomplete applications will not be considered to have met the deadline.

Please send completed application to: Native American Scholarship Fax: 701.328.2979
ND University System (NDUS)
600 E. Boulevard Ave Dept. 21
Bismarck, ND 58505-0602

PREFERRED: Secure Online Drop Box available for document upload: <https://sendfiles.ndus.edu/filedrop/NativeAmericanScholarship>

DO NOT email your application.

Complete applications include: (Applications will NOT be considered complete until ALL required documents are received by the North Dakota University System.):

- 2023-24 Application.
- Verification of tribal enrollment (*not required if applicant received an award disbursement in the prior year*).
- Most recent transcript showing cumulative GPA (*high school or college **unofficial** transcripts are acceptable*).
Grade reports and class schedules will NOT be accepted in lieu of a transcript.
- Free Application for Federal Student Aid (FAFSA) is filed with your college (required for need-based awards).
- Needs Analysis Form (or substitute) and Certification of ND Residency.

PLEASE PRINT CLEARLY:

Name _____
Last First Middle (Maiden)

Former name(s), if any, that may appear on transcripts or tribal enrollment certificate _____

Current **mailing** address _____
Street or PO Box Number City State Zip code

Social Security Number _____ Date of birth _____ Sex: Male Female

I understand I need to be a North Dakota resident to receive this scholarship. _____ [Your college will verify this information]
(initial)

Email Address _____ Phone Number _____

Student ID number _____ Member of which tribe _____

What is the **NAME** of the college you plan to attend in? Fall 2023 _____ Spring 2024 _____

What grade level will you be in 2023-24? Freshman Sophomore Junior Senior Graduate

What is your field of study (major)? _____

What degree will you be seeking? Certificate Associates or Bachelors Graduate (Master's or Doctoral)

I certify that the information given by me on this application is true, correct, and complete to the best of my knowledge and if granted financial assistance, I will use it only for education expenses related to my education. I authorize my college to release required enrollment, financial aid, admission, and transcript data to assist in determining eligibility for the scholarship.

APPLICANT SIGNATURE

DATE

NATIVE AMERICAN SCHOLARSHIP
2023-24 - Needs Analysis Form and ND Residency

This form must be returned by July 15, 2023, for priority award consideration. **ALL PARTS ARE REQUIRED!**
 Part 1 must be certified by the financial aid office at your college. Part 2 may also be certified by the financial aid office, or by another authorized representative of your college. You must complete, sign, and date Part 3.

Please send completed form via secure Drop Box, Fax or Mail: Native American Scholarship Fax: 701-328-2979
 ND University System (NDUS)
 600 E Boulevard Ave Dept. 21
 Bismarck, ND 58505-0602

PREFERRED: Upload using the NAS Secure Drop Box: <https://sendfiles.ndus.edu/filedrop/NativeAmericanScholarship>

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, or other suitable documentation from the college with all of the information listed.

NEEDS ANALYSIS	Fall 2023	Spring 2024	Summer 2024
Cost of Attendance (COA)			
Financial Aid Resources (exclude loans)			
Expected Family Contribution (EFC)			
Financial Need (COA-Resources-EFC)			

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

PART 2 (COLLEGE COMPLETES) - CERTIFICATION OF NORTH DAKOTA RESIDENCY: Residency for the purposes of the Native American 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 _____
 (Insert applicant's name)
 IS a resident of North Dakota
 IS NOT a resident of North Dakota

Name/Title (printed) of person certifying residency **Date**

Signature of person certifying residency

PART 3 - 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 Native American 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 2023-24 FAFSA Application: YES NO

APPLICANT NAME (please print) **APPLICANT SIGNATURE** **DATE**