Enterprise Rancheria
Estom Yumeka Maidu Tribe

HIGHER EDUCATION
APPLICATION

The following documents are needed to complete your Enterprise grant application:

New & Returning Students:

1. Enterprise Rancheria Higher Education Application – Each Academic Year
2. Official High School Transcript or GED – New Students Only
3. Current College Transcripts – Each Semester
4. Financial Aid Review Form – Each Academic Year
5. Current Semester Registration Fees - Each Semester
6. Copy of Financial Award Letter or Denial Letter - Each Academic Year
7. Copy of Current Class Schedule - Each Semester

Applications must be received by the following date(s):

Academic Year: Applications must be returned by August 15th for the entire academic school year
Fall Semester Only: Applications returned by August 15th
Spring Semester Only: Applications returned by January 15th

We will give Fifteen (15) calendar days after the semester deadlines to get all supporting documentation into our office before we send out a denial letter. The time extension is based only on an extenuating circumstance that prevents you from submitting the documentation by the deadline. This extension shall be approved by the Education Committee.

The following is a list of fees the Tribe will cover when the application is approved:

1. Tuition per term – University $1000.00, Community $500.00
2. Books & Supplies per term – University $500, Community $300.00
   (Please Note: Your receipt for books & supplies must be submitted no more than Thirty (30) calendar days from the time you purchased your items in order for the Tribe to reimburse you.)
3. Transportation $100.00 full time student, $50.00 part time student (as long as funds are available)

Funding from the Enterprise Rancheria is contingent on the student sending all requested documents. No award will be made until all documents are received.
Enterprise Rancheria
Estom Yumeka Maidu

Student Contract

This contract is made and entered into for the academic school year. The contract is an agreement of obligations and academic progress the student must maintain in order to receive tribal scholarship.

All Applications Must:

1. Be an enrolled member of the Enterprise Rancheria.
2. Complete and submit an Enterprise Rancheria Scholarship application each academic year and summer term for which a scholarship is being requested.
3. Submit proof of admission to an accredited college, university, graduate school or vocational school.
4. Submit proof of high school graduation with date of graduation, or proof, of high school equivalency certification, college transcripts or academic testing results indicating ability to perform academic tasks as may be required by the post secondary institution.
5. Update transcripts from all colleges, universities or vocational schools previously attended.
6. Any additional documents as may be required to complete the application.

The Scholarship Recipient:

1. Must maintain a cumulative GPA of 2.0. The full-time student shall earn no less then 12 credit hours per semester/term. The three-quarter-time student shall earn no less then 9 credit hours per semester. The part-time student shall earn no less then 6 credit hours per semester/term, and
2. If a graduate student, must maintain a GPA of 2.0 and earn a minimum of 9 credit hours per semester/term, and
3. Who has not maintained the minimum academic requirements shall be placed on probation for one semester/term at which time the student will have the opportunity to bring their status up to the minimum standards according to this student contract. If the student does not meet minimum academic standards during the probationary period then they will be placed on suspension until they have attended one semester in the same category without benefit of the Tribal Scholarship, and
4. Must use funds specifically for educational purposes otherwise be suspended from the program and subject to repayment of the scholarship, and

STUDENT CONTRACT-continued

5. Must report withdrawal from the institution attended, changes in personal status i.e. marital, income, and name. Withholding any of the above information may result in automatic suspension from the program and/or repayment of the scholarship. If a student comes under any adverse circumstances beyond their control which ay cause the student to fall below the minimum required standards they must submit a letter and supporting documentation within 10 days stating the circumstances and why they may be unable to meet the standards, and

6. Must submit an official grade report at the end of each semester/term and by June the 30th of each year submit an official transcript to the Enterprise Rancheria Education Office, and
7. Shall attend the institution as stated in the award letter. There will be no transfer of funds to another institution during the academic year unless approved by the Enterprise Rancheria Education Office in advance, and

8. Shall pursue a degree leading toward an Associate, Bachelors, Masters or Doctorate Degree, or a certificate from a college certification program, and

9. Shall not be funded for more than 6 semesters for an Associate or Arts Degree, 10 semesters for a Bachelors Degree, and 5 semesters for a Masters Degree. Doctoral candidates will receive assistance for up to 6 semesters beyond the Masters Degree plus the necessary time to complete a dissertation, and

I have read the above requirements and understand my obligation to the Enterprise Rancheria Education Department. I hereby certify that the information I have given is true and accurate to the best of my knowledge. Any violations of this agreement may be grounds for immediate suspension from the scholarship program or I will be obligated to reimburse to the department any scholarship, which I have received. I understand that in the event I believe that the scholarship officer has erred or has not been fair in the administration of the scholarship program, I may submit a letter to the Tribal Administrator to appeal the decision of the scholarship officer within 10 days after I have been notified of the scholarship officer’s decision regarding my application.

Signature:____________________________________ Date:__________________
Enterprise Rancheria
Higher Education Grant Application

All information recessed is voluntary however; failure to fully complete all applicable areas may result in delays of processing this application or make it impossible to process at all.

Name: ___________________________________ S.S. #: __________________________
Last First Middle Maiden

Address: __________________________________ Telephone: ____________________________
Number & Street

City: ______________ State ______ Zip ____________

Mailing Address: _______________________________________________________________
(If different then street address)

Date Of Birth: ________ Sex: ___ Marital Status: ___Single___ Married___ Divorced ___ Separated

Enrollment #: ____________________ No. Of Dependents: ______

Name & Address of High School: ______________________________________________________

Type of High School: __ BIA __ Tribal __ Private __ Mission __ Public __ GED

Graduation/GED Date: __________________________

Application Request: 20____ to 20____ _________ Full-time _________ Part-time

_____Academic Year _____ Spring Only ______ Fall Only _____ Summer

Name & Address of College Selected: ________________________________________________

College Major: __________________________________________ Expected Graduation Date: __________________________

Expected Degree: □ AA □ BA □ BS □ MA □ Other: __________________________________________

Year in College: □ Freshman □ Sophomore □ Junior □ Senior Graduate

I will Live: □ On Campus □ Off Campus □ With Parents

Have you received a BIA or Tribal Grant before? _____ Yes ______ No

If yes, what year? _______ Number of Semester Hours earned: _______ Quarter Hours: _______

Statement of Education Purpose: I declare that I will use any funds I receive under the Enterprise Rancheria Higher Education Grant Program solely for expenses connected with attendance at my College/University.

_________________________________________ Date

Applicant’s Signature
STATEMENT OF GOALS

Briefly, indicate your Educational goals and what plans you have for utilizing your education.

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

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________________________________________________________________________

________________________________________________________________________


STATEMENT OF EDUCATIONAL PURPOSE

I declare that I will use any funds I receive under the Enterprise Rancheria Higher Education Program solely for the expenses connected with attendance at:

________________________________________________________________________

Date: _________________ Signature: __________________________________________
Financial Aid Review Form

To be completed by the financial aid advisor. Please do not fill out this form until student’s file is complete. We do not want estimates.

Name: _______________________________ Student ID.#: ___________________
Address: ______________________________ City: __________ State: ____ Zip: _________

School year: 20___ to 20___

School Expenses: 

<table>
<thead>
<tr>
<th>Item</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuition &amp; Fees</td>
<td>$_______</td>
</tr>
<tr>
<td>Books &amp; Supplies</td>
<td>$_______</td>
</tr>
<tr>
<td>Room &amp; Board</td>
<td>$_______</td>
</tr>
<tr>
<td>Personal &amp; Child Care</td>
<td>$_______</td>
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<tr>
<td>Transportation</td>
<td>$_______</td>
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<tr>
<td>Other (Specify)</td>
<td>$_______</td>
</tr>
<tr>
<td><strong>Total Expenses:</strong></td>
<td>$_______</td>
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</tbody>
</table>

Resources: 

<table>
<thead>
<tr>
<th>Item</th>
<th>Amount</th>
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</thead>
<tbody>
<tr>
<td>Student contribution</td>
<td>$_______</td>
</tr>
<tr>
<td>Parent contribution</td>
<td>$_______</td>
</tr>
<tr>
<td>Other (Specify)</td>
<td>$_______</td>
</tr>
<tr>
<td><strong>Total Resources:</strong></td>
<td>$_______</td>
</tr>
</tbody>
</table>

We have made the following awards:

<table>
<thead>
<tr>
<th>Award</th>
<th>Amount</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Federal Pell</td>
<td>$_______</td>
<td></td>
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<tr>
<td>SEOG</td>
<td>$_______</td>
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<td>Ssig</td>
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<tr>
<td>Work Study</td>
<td>$_______</td>
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<tr>
<td>Perkins Loan</td>
<td>$_______</td>
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</tr>
<tr>
<td>Tuition Grant</td>
<td>$_______</td>
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<tr>
<td>Federal Stafford Loan</td>
<td>$_______</td>
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<tr>
<td>Fed Un-Subsidized Loan</td>
<td>$_______</td>
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</tr>
<tr>
<td>Other (Specify)</td>
<td>$_______</td>
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</tr>
<tr>
<td><strong>Total Awards:</strong></td>
<td>$_______</td>
<td></td>
</tr>
</tbody>
</table>

Recommended Tribal Award: (20__) Fall $_______ (20__) Winter $_______
(20__) Spring $_______ (20__) Summer $_______

Signature: __________________________ Date: __________________________
Financial Aid Officer

Print: __________________________ Phone: __________________________
Financial Aid Officer

Name and Address of Institution: __________________________________________

________________________________________

Please return to: Enterprise Rancheria
2133 Monte Vista Ave., Oroville, CA 95966
Ph: 530-532-9214 Fax: 530-871-6655
RELEASE OF FINANCIAL AID INFORMATION

Name: _______________________________ DOB: ____________

Address: __________________________________________________________

Phone: ______________________ Student ID _______________________

I hereby give the Office of Financial Aid permission to discuss and release Information regarding my financial aid with the person(s) listed below:

Enterprise Rancheria, Estom Yumeka Maidu Tribe
2133 Monte Vista Ave.
Oroville, CA 95966

Phone – 530-532-9214
Fax – 530-871-6655

College Name: _______________________________________________________

Address:

___________________________________________________________________
___________________________________________________________________

_______________________________________ __________________
Name Date
RELEASE OF ADMISSION AND RECORDS INFORMATION

Name: _______________________________________  DOB: _____________

Address: ___________________________________________________________

Phone: _____________________________  Student ID _____________________

I hereby give the Office of Admission & Records permission to discuss and release information regarding my enrollment and fees with the person(s) listed below:

Enterprise Rancheria, Estom Yumeka Maidu Tribe
2133 Monte Vista Ave.
Oroville, CA 95966

Phone – 530-532-9214
Fax – 530-871-6655

College Name: _______________________________________________________

Address:
_______________________________________________________________

_______________________________________________________________

_______________________________________________________________

_______________________________________________________________

Name ___________________________  Date _________________