



PUEBLO OF JEMEZ SCHOLARSHIP PROGRAM APPLICATION FORM

**APPLICATIONS RECEIVED AFTER THE DEADLINE DATE WILL
NOT BE CONSIDERED!**

**** APPLICATION DEADLINE****

Fall Semester: **July 1st** Spring Semester: **January 15th**

CONTINUING applicant (student who has been awarded the Pueblo of Jemez scholarship within the last two semesters)

Term Applying for:

20__ FALL SEMESTER 20__ SPRING SEMESTER

Name: _____

Last First Middle

Current Living Address: _____

Street/P.O Box City State Zip code

Permanent Address: _____

Street/P.O Box City State Zip code

Date of Birth: _____ Phone No: _____

Tribal Census Number: _____ **School Email:** _____

Are you a veteran? () Yes () No If yes, have you applied for veteran’s benefits? () Yes () No

Mother’s Name (maiden last name, if married): _____ Father’s Name: _____

GED or High School Information:

High School _____ **Graduation Date:** _____

High School Address: _____

Type of High School: () Public School () BIE School () Private School () Charter () Other

Grade Point Average: _____

List any awards or honors you received and any extracurricular activities you participated in (i.e. sports, clubs):

I received my GED (attach documentation to completed application) GED Completion Date: _____

Accredited University or College to attend/attending: _____

College Level:() 1st year () 2nd year () 3rd year () 4th year () Graduate () Other _____

Housing: () On Campus () Off Campus Expected Date of Graduation: _____

Grade Point Average: _____ Major: _____

Last University or College attended if different from above: _____

List any awards or honors you received and any extracurricular activities you participated in (i.e. sports, clubs):

I plan to attend the school indicated on this application and agree to the best of my ability to work towards the career goals which I have selected. I give my permission to the Jemez Scholarship Office to obtain my transcripts and financial aid information upon request. I accept the conditions stipulated in the Jemez Scholarship guidelines.

Applicant Signature: _____ **Date:** _____

Department of Education

139-G Bear Head Canyon Rd, Box 60 • Jemez Pueblo • New Mexico • 87024
575.834.9102 • Fax: 575.834.7331 • scholarships@jemezpueblo.org

PUEBLO OF JEMEZ SCHOLARSHIP PROGRAM

REQUIREMENT FORM

APPLICANT:

The following is a list of the terms and conditions of the Jemez Scholarship Application. *If it has been more than two consecutive semesters that you have sought funding from the Pueblo of Jemez Scholarship Program, you will be considered a new student and will need to re-submit all items, except the CIB.* It is the applicant's responsibility to have all requested forms in the Pueblo of Jemez Scholarship Office on or before the deadlines below. **Transcripts need to be sent after the completion of each semester.**

Please check scholarship(s) you are applying for:

- Financial Need Scholarship
- Health/Allied Health Scholarship
- Graduate Scholarship
- Merit Scholarship
- Delfino Castillo (AudioVisual/Technological) Scholarship
- Judith Tempest Lawall (Health Career) Scholarship
- John Swagerty (Agriculture) Scholarship
- Moiety Scholarship, "In memory of Jimmy Shendo"

CONTINUING STUDENT SCHOLARSHIP REQUIREMENTS:

1. **Pueblo of Jemez scholarship application form** must be filled out completely signed and dated.
2. A copy of letter of acceptance from the accredited two or four-year institution to attend, **IF student has transferred.**
3. An **official transcript** from college attended **Emailed to scholarships@jemezpueblo.org**
4. November 1 and March 1 of every school year student should fill out Federal Application for Student Aid (FAFSA).
5. **Semester course schedule.** Applicant must be enrolled Full Time (Undergraduate or Graduate) each semester.
6. **Financial Needs Analysis Form** (Pueblo of Jemez Document). **ONLY** if applying for the **Financial Need Scholarship**. Must be completed each semester (Fall and Spring)

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FINANCIAL NEED SCHOLARSHIP REQUIREMENTS: (regionally accredited schools only, see list on last page)

1. **Applicant must fill out the Federal Application for Student Aid (FAFSA)** and any supplemental forms in the financial aid office of the accredited institution to attend. This includes PELL, SEOG (supplemental education opportunity grant) and other grants available.
2. **GPA Requirement- Cumulative:** new students must have a 2.0 GPA to apply, once accepted student must acquire and maintain a 2.5 GPA.
3. **Pueblo of Jemez Tribal Needs Analysis Form** (see last page) to be completed by the financial aid office of institution to attend/attending, must be completed and submitted at the end of **EACH SEMESTER**

HEALTH BASED REQUIREMENTS: (regionally accredited schools only, see list on last page)

1. **Personal statement** on why you chose your specific health/allied health program and what you will do with the degree/certification once received

GRADUATE SCHOLARSHIP REQUIREMENT:

1. **GPA Requirement- Cumulative:** new students must have a 3.0 to apply, once accepted student must acquire and maintain a 3.2 GPA

MERIT BASED REQUIRMENTS: (regionally accredited schools only, see list on last page)

1. **GPA Requirement- Cumulative:** new student must have a 3.0 GPA to apply, once accepted student must acquire and maintain a 3.2 GPA.

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DELFINO K CASTILLO SCHOLARSHIP REQUIREMENTS: (regionally accredited schools only, see list on last page)

The mission of Delfino K Castillo Scholarship is to "Encourage, Honor, and Secure the Hemish way of life through creative technological advancements". The Vision of Delfino Castillo Scholarship is "Empower Walatowa people to achieve higher education in the field of audio visual technology, animation and web design. In pueblo culture, we are unique in that we hold strong to our traditional and cultural values".

Please write a 500- word (or less) statement that best describes how receiving the Delfino K Castillo Scholarship will help you continue the mission of the Scholarship in the Pueblo of Jemez Community.

Please include the following:

- a) What does it mean to value your tradition, culture, community, and education and how can you use your degree in audio/visual technology to honor those things?
- b) What are your professional/career goals and how will you utilize these goals to contribute to the Pueblo of Jemez?
- c) As a member of Jemez Pueblo, where do you see a need in the community for improvement and how will you utilize your education to fulfill the need?

JOHN SWAGERTY AWARD FOR AGRICULTURE STUDENTS (open to all institutions)

\$500 award to One Student Available FALL and SPRING

1. **Eligible Programs (degree or certificate):** Agricultural Economics, Agricultural Engineering, Agricultural Mechanization, Agronomy and Crop/Soils Science, Animal Sciences, Fishing and Fisheries Sciences and Management, Greenhouse Operations and Management, Plant Physiology, Plant Sciences, Rural Sociology, Soil Sciences, and Natural Resources.
2. **GPA Requirement- Cumulative:** new students must have a 2.0 GPA to apply, once accepted student must acquire and maintain a 2.5 GPA.
3. **Personal statement** on why you chose your specific agriculture program and what you will do with the degree/certificate was received

JUDITH TEMPEST LAWALL AWARD FOR FUTURE HEALTH CARE CAREERS (open to all institutions) \$500 award to One Student Available FALL and SPRING

1. **Eligible Programs (Health based degree or certificate programs)**
2. **Personal statement** on why you choose your specific Health program and what you will do with the degree/certificate when received
3. **GPA Requirement- Cumulative:** new students must have a 2.5 GPA to apply, once accepted student must maintain a 2.5 GPA.

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MOIETY SCHOLARSHIP, IN MEMORY OF JIMMY SHENDO (open to all institutions)

The mission of Moiety Scholarship is to "Encourage, Honor, and Secure the Hemish way of life". The Vision of Moiety Scholarship is "Empower Walatowa people to achieve higher education".

Moiety exemplifies two social group which are divided (Turquoise and Pumpkin society) but come together as one. In Pueblo culture, we are unique in that we hold strong to our traditional and cultural values. Please write a 500- word (or less) statement that best describes how receiving the Moiety Scholarship will help you continue the mission of Moiety Scholarship in the Pueblo of Jemez Community.

2. Please include the following:

- a) What does it mean to value your tradition, culture, community, and education?
- b) What are your professional/career goals and how will you utilize these goals to contribute to the Pueblo of Jemez?
- c) As a member of Jemez Pueblo, where do you see a need in the community for improvement and how will you utilize your education to fulfill the need?

I agree to use scholarship funds solely for the purpose intended. If I obtain a student loan, the Pueblo of Jemez Scholarship Program will not be held responsible for repayment. If I change schools, drop, withdraw, or change my student status from full to part time during the academic year, I will promptly notify the Jemez Pueblo Scholarship Office. In the event I withdraw, any unused scholarship money awarded to me will be returned.

Applicant Signature: _____ **Date:** _____

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Pueblo of Jemez Scholarship Program

STATEMENT OF PRIVACY

The Privacy Act of 1974 requires each Federal Agency that maintains a system of information on individuals to inform those individuals as to:

- A. The authority (whether granted by statute, or by executive order of the President which authorizes the solicitation of the information and whether disclosure of such information is mandatory or voluntary.
- B. The principal purpose or purposes for which the information is intended to be used.
- C. The routine uses which may be made of the information as published pursuant to paragraph (4) (D) of the subsection; and of the requested information.

The Bureau of Indian Affairs Higher Education Assistance Program operates under the general authority of 24 USC Chapter 13, 42 Stat.208 P.L. 76-85 with specific legislation contained in 25USC, Subchapter E, Part 32, Administration of Education Loans, Grants, and Other Assistance for Higher Education. In accordance with accountability required for the Administration of the funds appropriated for the program and in order to provide services to recipients, and to declare eligibility, certain information is required of applicants. This form solicits the required information. Use of personal data will be available to authorized sources upon request. The applicant should understand that the intent of collecting and maintaining this data on individuals is for determining eligibility of the applicant and to provide the means for producing certain statistical records required of this Office. Failure on the part of the applicant to comply with this legislation will remove the applicant from eligibility in obtaining higher education assistance under this program.

I have read the statement on privacy listed with application form. I hereby provide the required information and authorize the use of such information to the extent of the uses specified in the statement.

WITNESS

APPLICANT SIGNATURE

DATE

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The Pueblo of Jemez GENERAL Scholarship Program will ONLY provide scholarships to those tribal members enrolled in colleges/universities that are regionally accredited, please make sure that your school of choice falls within these guidelines.

ACCREDITING ASSOCIATIONS- Regional Accreditation

Middle States Association of Colleges and Schools (MSACS)

Delaware, District of Columbia, Maryland, New Jersey, New York, Pennsylvania, Puerto Rico, Virgin Islands.

New England Association of Schools and Colleges (NEASC)

Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, Vermont

North Central Association of Colleges and Schools (NCACS)

Arizona, Arkansas, Colorado, Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Missouri, Nebraska, New Mexico, North Dakota, Ohio, South Dakota, West Virginia, Wisconsin, Wyoming

Northwest Association of Colleges and Schools (NMACS)

Alaska, Idaho, Montana, Nevada, Oregon, Utah, Washington

Southern Association of Colleges and Schools (SACS)

Alabama, Florida, Georgia, Kentucky, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, Texas, Virginia

Western Association of Colleges and Schools (WACS)

Accrediting Commission for Senior Colleges and Universities (ACSCU)

Accrediting Commission for Community and Junior Colleges (ACCJC)

America Samoa, California, Guam, Hawaii, Trust Territory of the Pacific

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PUEBLO OF JEMEZ SCHOLARSHIP PROGRAM

FINANCIAL NEEDS ANALYSIS

STUDENT: Complete Section One and submit to the financial aid office at your college or university to have them complete Section Two, at least one month before the scholarship deadline.
All students are required to apply for all forms of financial aid at your college or university in addition to the Pueblo of Jemez Scholarship Program.

SECTION ONE

Name _____ Tribal Census No. _____
Address _____
City _____ State _____ Zip _____
Student ID _____ Marital Status _____ No. of Dependents _____
College/University _____ Major(s) _____
School Year: 20__-20__ Check One: () 1st year () 2nd year () 3rd year () 4th year () Other _____

SECTION TWO

Financial Aid requested will cover expenses from one of the following periods: August/September to December or January to May/June

Enrollment Status: Full-time _____^{Month/Year} 3/4-time _____^{Month/Year} 1/2-time _____ <1/2-time _____

School Calendar: Semesters _____ Quarters _____ Trimesters _____

Has the student filed his/her FAFSA? Yes No

Is the student eligible for federal funding? Yes No

Expenses

Tuition/Fees \$ _____
Room/Board \$ _____
Books/Supplies \$ _____
Transportation \$ _____

Resources

Pell \$ _____ Veterans Benefits \$ _____
SEOG \$ _____ Personal/Summer \$ _____
CWS \$ _____ Parent Contribution (EFC) \$ _____
NDLS \$ _____ Inst./Dept. Scholarships \$ _____
SSIG \$ _____ Private Scholarships \$ _____
NM Lottery \$ _____ Other _____ \$ _____

TOTAL EXPENSES \$ _____

TOTAL RESOURCES \$ _____

RECOMMENDED AMOUNT FROM THE PUEBLO OF JEMEZ SCHOLARSHIP \$ _____

Student is making satisfactory academic progress: YES NO If no, please comment:

I hereby certify that the above individual has applied for and been considered for both Federal and Campus based financial aid.

Financial Aid Officer/Phone No. _____

Institution Name _____

Date _____

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