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# CCT Graduate Scholarship Program Application Packet

## **2023-2024**

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Dear Student,

Thank you for your interest in applying for the Chippewa Cree Graduate Scholarship Program through Stone Child College. Please be sure to read the Graduate Scholarship Program Handbook as it does contain important information regarding eligibility and requirements. The Graduate Handbook can be accessed online at <https://www.stonechild.edu/scholarships-higher-ed/>

There are **two (2)** deadlines for the Graduate Scholarship Program.

- Graduate Scholarship Program Application deadline: **March 31, 2023**
- File completion deadline: **June 30, 2023**

Please note that it is the applicant's responsibility to submit all application items required to complete their file by each deadline date.

The tribal members must be in graduate programs and attend accredited institutions. The Chippewa Cree Graduate Scholarship Program has stipulated conditions for students and awards will vary in amounts. The funding will assist the student in meeting their educational goals, to develop leadership skills, and to increase their employment opportunities which will meet the tribes economic, social and cultural goals. By accepting a Chippewa Cree Graduate Scholarship, the individuals must agree to work within the Rocky Boy's Indian Reservation, preferably for the Chippewa Cree Tribe, for a minimum of two years for each year of funding received. This is if employment is available in their respective fields.

You are also advised that any award you may receive may be subject to an adjustment based on the level of funding you receive from additional scholarships, grants, waivers, etc. Applicants should be prepared that NOT all students who apply will be awarded a scholarship. Due to the increase in the number of students applying for funding and the rising costs of tuition, scholarships have become more competitive than in the past. **Only students in good academic standing and with a complete application file will be considered for funding.**

If an application is submitted after the March 31<sup>st</sup> deadline date, it will be marked as LATE and kept on file. We cannot guarantee any funding for late applicants only if funding is available later in the year. If there is funding available, we will review the LATE applications and the Board of Directors will decide if we are able to assist with funding.

Included in this packet are the following documents:

- **Checklist for the Graduate Scholarship Program**
- **2023-2024 Graduate Scholarship Program Application Form**
- **Financial Needs Analysis Form**
- **FERPA/Release/Disclosure Form**

If you have any questions or concerns regarding the application process, or need clarification, please contact me at (406)399.4875 ext. 1245 or by email at [abelcourt@stonechild.edu](mailto:abelcourt@stonechild.edu)

Sincerely,

Amanda Belcourt, Scholarship Officer & Career Counselor

# Graduate Scholarship Program Checklist

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The Graduate Scholarship Program is submitted online at [stonechild.edu](http://stonechild.edu). The Graduate Scholarship Program has two (2) application deadline dates.

**The applicant must submit the following by the first deadline date of March 31:**

1. Tribal Graduate Scholarship Program online application
2. Verification of financial aid application for academic year applying for funds.

**The applicant must submit the following to complete the application process by the final deadline date of June 30<sup>th</sup>:**

3. **Needs analysis (budget)** - filled out and signed by financial aid office at college that will be attended during award year.
4. **Official college acceptance** letter for award year.
5. **Chippewa Cree Tribal enrollment verification** – contact the Chippewa Cree Tribal Enrollment Office (406) 395-5238 for the Certification of Indian Blood or Tribal ID.
6. **Official College Transcripts** - grade transcripts showing a bachelor's degree has been earned.
7. **Release of information** - form signed and submitted to the Higher Education office.
8. **Personal letter of interest**
9. **Academic rules and regulations** - from the institution you plan to attend.
10. **Education Plan** - must be filled out with classes that you have taken and signed by your college advisor
11. **Agreement Form** – signed and submitted to the Higher Education Office.
12. **Tribal Scholarship Program Terms** – signed and submitted to the Higher Education office.



**III. HIGH SCHOOL/GED**

\_\_\_\_\_  
High School Attended

\_\_\_\_\_  
Graduate Year or Date HiSet/GED Received

\_\_\_\_\_  
School Address

\_\_\_\_\_  
City, State, Zip

**IV. COLLEGE INFORMATION**

\_\_\_\_\_  
College/University Attending

\_\_\_\_\_  
College University Phone #:

\_\_\_\_\_  
College/University Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Major

\_\_\_\_\_  
Expected Degree (AA, AAS, BA, BS, MA, MS, MBA)

\_\_\_\_\_  
Enrollment Status (Full Time / Part Time)

\_\_\_\_\_  
Expected Graduation Date

Term Format: Semester \_\_\_\_\_ Quarter \_\_\_\_\_ Hours \_\_\_\_\_ (Vocational)

\_\_\_\_\_  
Past College/University

\_\_\_\_\_  
Graduation Date

\_\_\_\_\_  
College/University Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Past Major

\_\_\_\_\_  
Past Degree (AA, AAS, BA, BS, MA, MS, MBA)

\_\_\_\_\_  
Past College/University

\_\_\_\_\_  
Graduation Date

\_\_\_\_\_  
College/University Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Past Major

\_\_\_\_\_  
Past Degree (AA, AAS, BA, BS, MA, MS, MBA)

**V. APPLICATION INFORMATION**

Application Type: Higher Education\_\_\_\_\_ Adult Vocational Training (AVT)\_\_\_\_\_ CCT Graduate\_\_\_\_\_

Application for: Academic Year 20\_\_\_\_ to 20\_\_\_\_\_

I am a: Continuing Student [ ] New Student [ ] Returning Student [ ] (see Policy definitions)

Have you received any funding from the Higher Education Program Office in the past? YES\_\_\_\_\_ NO\_\_\_\_\_

If yes, which scholarship? Higher Ed\_\_\_\_\_ AVT\_\_\_\_\_ CCT Graduate\_\_\_\_\_

How many semesters/quarters or years on program? \_\_\_\_\_

**STATEMENT OF CERTIFICATION**

I hereby certify that, to the best of my knowledge, I have answered the questions on this form accurately. I understand that providing false or misleading information may result in the delay or denial in receiving a Higher Education Program Scholarship.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

# CHIPPEWA CREE TRIBAL SCHOLARSHIP PROGRAMS

8294 Upper Box Elder Road  
Box Elder, MT 59521  
Phone: 406-395-4875 ext 1245  
Fax: 406-395-5017 or 4836

## FINANCIAL NEEDS ANALYSIS (Budget)

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**APPLICANT** – Complete this section, after completion submit to the financial aid office at the institution you plan to attend:

Name: \_\_\_\_\_ Social Security Number \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
E-Mail: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Marital Status: Single \_\_\_\_\_ Divorced \_\_\_\_\_ Married \_\_\_\_\_ Number of Dependents: \_\_\_\_\_  
Grade in College: Freshman \_\_\_\_\_ Sophomore \_\_\_\_\_ Junior \_\_\_\_\_ Senior \_\_\_\_\_ Other \_\_\_\_\_

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**FINANCIAL AID OFFICER** – Complete this section, after completion please send to the above address. The above student has applied for a tribal scholarships and verified financial need information is requested from your office before we can determine the student's eligibility and reward amount.

<b>EXPENSES:</b>		<b>RESOURCES:</b>			
Tuition/Fees	\$ _____	Personal/Summer	\$ _____	Pell Grant	\$ _____
Room/Board	_____	Parent Contribution	_____	MTAP	_____
Book/Supplies	_____	Spouse Contribution	_____	FSEOG	_____
Transportation	_____	Veteran's Benefits	_____	MTHEG	_____
Personal	_____	Indian Fee Waiver	_____	Work Study	_____
Other	_____	Loan/Other	_____	Perkins Loan	_____
Total Expense:	\$ _____			Total Resources:	\$ _____

STUDENT UNMET NEED (Expenses Less Resources) \$ \_\_\_\_\_

Student Budget Period: \_\_\_\_\_ TO \_\_\_\_\_  
(Month) (Year) (Month) (Year)

Student is considered: Independent \_\_\_\_\_ Dependent \_\_\_\_\_  
Student Financial Aid Status: Good Standing \_\_\_\_\_ Probation \_\_\_\_\_ Suspension \_\_\_\_\_ Default \_\_\_\_\_  
Your institution is on: Semesters \_\_\_\_\_ Quarters \_\_\_\_\_ Other \_\_\_\_\_

\_\_\_\_\_  
Date Financial Aid Officer Signature Institution

\_\_\_\_\_  
Phone Number Address

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Tribal Scholarship Program applicants must apply for Federal Student Aid by March 1, and complete the Tribal Scholarship Application Process online by final deadline date of June 30<sup>th</sup> each year.

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**FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT (FERPA)**

The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. § 1232g; 34 CFR Part 99) is a federal law that protects the privacy of student education records. The law applies to all schools that receive funds under an applicable program of the U.S. Department of Education. FERPA gives parents certain rights with respect to their children's education records. These rights transfer to the student when he or she reaches the age of 18 or attends a school beyond the high school level.

I, \_\_\_\_\_ (student) read the FERPA law above and will abide by this law. I will communicate directly with the Stone Child College Higher Education Scholarship Program office.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**RELEASE OF INFORMATION**

I, \_\_\_\_\_ authorize release of any and all information requested by the Chippewa Cree Tribe/Stone Child College Higher Education Scholarship Programs Office. The information may be written and/or verbal and must include, but, is not limited to my academic performance, financial aid, income, personal information (such as, address, telephone number). I understand the Higher Education Scholarship Programs Office will maintain the confidentiality of such information.

\_\_\_\_\_  
(Signature) \_\_\_\_\_ (Date)

\_\_\_\_\_  
(Address) \_\_\_\_\_ (Telephone Number)

\_\_\_\_\_  
(City) (State) (Zip Code) \_\_\_\_\_ (Social Security Number)

**DISCLOSURE OF PERSONAL INFORMATION:**

Disclosure by you of your social security number, transcripts or school grades, medical records, and income verification, veteran's status, legal records, debt, disability evaluation and other information which may have a bearing on your application. The authority for collection of this information is: CFR 25, 34.2 U.S.C. 13 and 309 831 AM 4. The sole purpose of this information is to determine eligibility.

I AUTHORIZE THE CHIPPEWA CREE TRIBE/STONE CHILD COLLEGE HIGHER EDUCATION PROGRAMS THE USE OF THE INFORMATION LISTED ABOVE.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_