SENECA NATION OF INDIANS SCHOLARSHIP FUND Department of Education

Higher Education Program Allegany Territory PO Box 231 3667 Administration Drive Salamanca, NY 14779 (716) 945-1790 ext. 3103 Fax (716) 945-7170

Higher Education Program Cattaraugus Territory 2016 Hënödeyësta' Dr. Suite 2 Irving, NY 14081 716-532-3341 fax: 532-8335 Email: <u>snihighered@sni.org</u> Web: www.sni.org/hep

DEADLINES : Fall-July 16, Winter-November 1, Spring-January 4, Summer-May 20 All required documents must be submitted 60 days from deadline Please remember the payment process may take up to four weeks.

Scholarship Policy & Application

Students please note:

- Falsification of records and reports by student applicants and/or funding recipient will cause your funding to be denied by the SNI-HEP.*
- ^o SNI-HEP is a secondary source of funding. All applicants will be required to follow the mandatory requirements.
- ° SNI-HEP will provide scholarship funding for maximum of two (2) Baccalaureate Degrees.
- SNI-HEP will <u>not</u> provide scholarship funding for Continuing Education or Professional Development courses.
- ^o SNI-HEP will <u>not</u> provide scholarship funding for Student Health Insurance or late fees.

<u>It is the Students RESPONSIBILITY to request a waiver of late fees and deferments through</u> your colleges' student accounts office.

I. ELIGIBILITY

- A. Each applicant MUST:
 - Be an enrolled member of the Seneca Nation of Indians
 - -Comply with all rules and regulations that accompany funding sources. (FAFSA, TAP, NYSIA)

-Be matriculated in a degree granting program (Associates, Bachelors, Masters, or Doctorate) at an accredited higher education institute or

-Be enrolled and attending a Certificate granting program at an accredited institute or

-Be enrolled in College Level classes for credit as a high school student.

II. MANDATORY REQUIREMENTS

Failure to apply by the required deadlines will result in SNI funding being denied. There will be NO EXCEPTIONS.

- A. All students must complete:
- 1.) SNI-HEP application and must be postmarked by the following deadlines: Semesters: FALL – July 16th *WINTER-November 1st * SPRING – January 4th *SUMMER – May 20th

2.) Free Application for Federal Student Aid Form (FAFSA) at <u>www.fafsa.ed.gov</u> Submit proof via email confirmation

- 3.) NYS Tuition Assistance Program (TAP) application at <u>www.hesc.ny.gov</u> Submit proof via email confirmation
- 4.) Part-time students attending within NYS must complete Assistance for Part-time Students (APTS) application See College for appropriate deadline. Submit proof via email confirmation
- 5.) NYS Indian Aid application Copy of completed application to be placed in students file as proof of submission. Student then mails or faxes application by the following deadlines: FALL July 16 * SPRING January 4th. The student must submit award letter from NYSIA to be placed in file.
- 6.) Students residing out-of- state are required to apply for their respective state grants. Submit proof via email confirmation
- B. Must be in compliance with each financial funding source's regulations and submit a copy of their award or denial letter or a copy of your PELL, TAP, NYSIA, APTS application.
- C. Send updated transcripts or copies of grade reports and proof of registration to the SNI-HEP at the end of each term.
- D. Keep copies of all applications and be able to provide them upon request.
- E. Notify the SNI-HEP in writing along with a copy of updated schedule when a change in the number of credit hours occurs within ten (10) working days of the change. If a change in credit hours generates an overpayment the student MUST repay these funds to the SNI-HEP or risk becoming ineligible for future funding.
- F. All students are required to submit a copy of their diploma after completing their degree program

Failure to report changes will result in termination of future funding. Refer to "Part VI Withdrawal" for procedures.

III. FUNDING ALLOCATIONS

Amounts are based on:

- Only complete applications, with full requirements (i.e. financial aid information, etc.) will be processed.
- The availability of scholarship funds.
- Status of permanent residency.
- Unmet Need; the financial need beyond allowable funding allocations as stated below regarding tuition, fees, room and board per policy restriction (see section IV E)

Funding status:

Level 1 - Undergraduate and Graduate students with permanent residence on territory. Level 2 - Undergraduate and Graduate students with permanent residence within New York State the counties of Warren, McKean and Erie in Pennsylvania. Level 3 - Undergraduate and Graduate students with permanent residence outside New York State.

IV. SNI-HEP AWARD

- A. Level 1: up to \$20,000 Level 2: up to \$17,000 Level 3: up to \$15,000
 Level awards applied to: Tuition, allowable Fees, Room and Board ONLY.
 Maximum award per academic year will be divided accordingly by term (semester, trimester, quarterly, etc..).
- B. Awards are based on allowable expenses minus resources. Unspent scholarship monies (over payment created by additional outside funding) must be returned to the Higher Education Program.
- C. Unmet Need <u>awards will be based on availability of funding</u> Unmet Need for Level I - 100% funding of unmet need Unmet Need for Level II - 50% funding of unmet need Unmet Need for Level III - 0
- D. Tuition and Fees will be verified each term by the students account activity report and if necessary individual school's financial aid office.
- E. Room & Board: a. Double occupancy dormers or larger (triples, quads...) only
 - b. Full-time Enrollment only
 - c. Off campus housing (conditional)
 - Proof of denial for on campus housing or no housing available.
 - Rental only with copy of rental agreement and signed housing waiver to HEP(not to exceed double occupancy cost).
 - Per semester payment for Fall and Spring only, must reapply to campus housing program the next academic year.
 - Meal plan coverage only for full time students living on campus

The following awards will be available to all <u>eligible</u> students (dependent upon curriculum/schedule/need) Full time for undergrad is 12+credits /term and Graduate students are 9+credits/term or as designated by the institution.

F. Books:	a. Full-time student limit of \$800 per term b. Part-time rate of \$200 per three (3) credit hours. (\$66.67/credit hr)
G. Transportation:	 COMMUTERS ONLY a. Full-time student limit of \$700 per term b. Part-time student limit of \$175 per three (3) credit hours. (\$58.33/credit hr)
H. Supplies:	a. Full-time student limit of \$500 per term
	b. Part-time student is based on \$125 per three (3) credit hours. (\$41.66/credit hr)

I. Technology Expense:	a. Computer Allowance; including required software and peripherals: Ix per student every 5 years- limit of \$1500 <i>(justification required)</i> HEP will not be responsible to replace lost/broken/stolen items. Additional warranties will not be covered
J. Equipment/Tools	a. Required tools/equipment for certificate programs: 1x per student: limit \$1500 <i>(justification required)</i> SNI will not be responsible to replace lost/broken/stolen items. Additional warranties will not be covered
K. License/Certificate Expe	ense: a. Allowance based on program of study (1x per student, not for renewals)
L. Childcare Expense:	a. Full-time students allowance \$750/term b. Part-time students allowance \$375/term Must submit receipt on daycare letterhead or invoice

V. WITHDRAWAL

A. <u>Withdrawal from College:</u> The students must notify the SNI-HEP in writing (email) and submit school confirmation within 10 working days of withdrawal. - The student is responsible for repayment of all SNI-HEP monies or come to an agreement with the HEP Committee to adjust next term funding. If the student fails to repay the funds, they will potentially forfeit future eligibility for SNI-HEP funding.

B. Drop or Withdrawal from Classes:

<u>Full-time students</u> must notify the SNI-HEP in writing (email) and submit school confirmation and new schedule within 10 working days of dropping or withdrawing from a class if your change causes you to go from Full-time to Part-time and if your payment has already been made, the student must repay or make arrangement to repay the SNI-HEP. Failure to do so will potentially forfeit your eligibility for future funding.

<u>Part-time students</u> must notify the SNI-HEP in writing (email) and submit school confirmation and new schedule within 10 working days of dropping or withdrawing from class. If payment has already been made, the student must repay or make arrangements to repay the SNI-HEP. Failure to do so will potentially forfeit your eligibility for future funding.

VI. OVERFUNDING

Students who are OVERFUNDED as based on account summary (receive additional financial aid after our payment has been applied. i.e. NYSIA, PELL, TAP), will be required to repay these funds to the SNI-HEP. This includes Full and Part-time students. Eligibility of future SNI-HEP funding may be terminated if:

(1) Full repayment is not received within 6 months, or

(2) An adjustment to his/her next funding cycle is not arranged with the SNI-HEP within 10 working days of receipt of notice of over funding.

VII. Repayment

If a repayment of scholarships should become necessary due to a withdrawal from school and/or a class(es); a coordinated effort will commence between HEP and SNI Fiscal to determine how billing or repayment of said scholarships are to be enforced (with the exclusion of annuity payments).

VIII. ACADEMIC PROBATION/DENIAL

A term GPA (Grade Point Average) below a 2.0 will result in a student being placed on Academic Probation for the term which they are applying but remain eligible for funding. If the student falls below a 2.0 while on probation funding will be denied for the next term which they apply. If a student is denied funding, it can be restored once they submit proof of a GPA over a 2.0 while enrolled in the same courseload. A student is only allowed one (1) academic probation per degree.

IX. ELIGIBILITY RESTORATION

Restoration of Eligibility may be returned as related to personal hardship only through formal action. <u>Process for Restoration/Appeal</u>

- 1) The student must submit a written request for a review of eligibility to the Higher Education Coordinator.
- 2) The HEP Committee will review the request and render a decision within 10 business days

X. STUDENT FORGIVENESS

Students who have been out of school for five or more years are required to reach out to the Higher Education Program Coordinator for a file review before eligibility for funding can be reinstated.

XI. ONLINE PROGRAMS

A. All requirements of the Degree Program are applicable to funding for online degree programs, except the student is not eligible for transportation and childcare expenses.

Application & Documentation Requirements

DOCUMENTATION -All students must submit the following, please indicate the items that you are submitting					
,	with your application: All items must be turned in within 60 days of the HEP				
	application deadline.				
Submitted Items&					
Date submitted	<u>ALL STUDENTS – INCLUDING "NEW APPLICANTS"</u>				
	FAFSA (PELL)Submission Confirmation Page				
	State Aid (HESC/TAP) Submission Confirmation				
	_ State Indian Aid Submission Confirmation and Award Letter (NYS residents only)				

	Class Schedule-indicating number of credit hours for the semester with courses listed Transcripts-from last semester funded from SNI-not applicable to first-time applicants Account summary statement which shows all charges and credits for current and previous term
	Housing application confirmation (for on campus housing students only)
Submitted Items &	
Date Submitted	"NEW APPLICANTS" ONLY-(must submit items listed above also)
	Seneca Nation Tribal Certification (obtained from the SNI Clerks office)
	Copy of HS Diploma or GED
	College Transcript(s) if applicable
	Personal Letter of Educational Goal
	Letter of Reference (not a relative)
	Letter of Acceptance College/ Vocational/ Technical Training Program
	College Financial Aid Award Letter (if applicable)

By signing below, I understand that my application will be considered incomplete & will not be processed if any of the documents requested above are not submitted with for this application within 60 days of the posted deadline. I also understand that it is my responsibility to make sure the above items are received in the HEP office in a timely manner to secure student course selection and housing placement.

C 1 .	•
Student	signature:
20000110	Signator .

Date:

SENECA NATION of INDIANS SCHOLARSHIP APPLICATION

Name:	Tribal Enrollment ∦
Maiden Name:	College ID #
Parent/Guardian Name(s):	Date of Birth
Permanent Physical Address	City/ST/ZIP

(as noted on student bill):										
Mailing Address (if different):					City/S	Г/ZIP				
Home Phone:					Cell Ph	none:				_
Email Address:					Cell-Te	ext Capab	le?	Yes	No	
If previously funded										a at at at at at a
College applying t College Address: (City,State,Zip) _ Semesters & Year (can check more th	o :applying for: FAL								ER 20	
Student Status:	 Full-time S Full time status:						lits/ Pa	rt time is l	less than p	osted
Student Level:	Undergraduate : _Graduate:			Sophon Doctora		Junior		Senior		
Housing Plan:	Campus Approved occupancy Off-Campus or Cor	_		_	y if you a	re full-time	e, living	on campus	s AND in a	double
Degree Type:	AA	AS	BA	BS		MA	MS	Ot	ther	
Major:			_	M	inor/Co	ncentrati	on:			
Anticipated Gradu			- Cor	tificat	o Dro	Trame	ply fi	ill out:		
Vocational or Tech Program:		CATION			<u>.c 110</u>					_
Institution/Facilit	y Name:									_
City, State, Zip					P	hone∦ ()		1	_
Program of Study:				FT:	hrs.pe	er week	PT hr	rs. per we	ek	_
Expected Comple	tion Date:									
Licensure Require	ed Upon Certificati	on Complet	tion	Yes	No					

Equipment and Tools Allowance Justification

If you are attending a program that requires equipment and tools to use as part of your training, you must submit a copy of the items needed. Purchases will be reimbursed up to \$1500.00 with receipt. Allow up to 30 days for processing.

Allowable items:	Items not covered:		
✓ Tools	✓ Business attire		
✓ Specific shoes	✓ Optional tools/equipment		
✓ Specific uniform	✓ Items not on the required list		
✓ Safety glasses			
 Equipment(must provide list given to students by 			
the school)			

Duplication of services by other resources is not permitted and is subject to verification by the Higher Education Program. Students will receive written notification of approval/disapproval for this allowance. *Students who withdraw are required to reimburse the Higher Education Program in accordance with V. Withdrawal for the amount reimbursed under this allowance.*

Childcare Allowance Justification

The childcare allowance is provided to full and part-time students to assist with the payment of childcare over the course of a semester. This allowance is to provide assistance where other types of assistance is not being utilized, such as a block grant, Employment & Training Program, other State assistance. Payment is made at the beginning of the semester. For students on a quarter/term academic year, the payment is prorated. Participation in other resources of childcare assistance is subject to verification by the Higher Education Program. Proof of childcare enrollment is required.

I ______ hereby provide the Higher Education Program the Release of Information to verify my participation in other resources to avoid duplication of services by the HEP.

Date: ____/ ___/____

Computer Technology Allowance Justification					
State the purpose for the request for the computer allowance:					
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Items allowed:	Items not covered:				
✓ Desktop computer	✓ Additional warranties or securities				
✓ Laptop	 ✓ Ink cartridges (covered under Supplies) 				
✓ Microsoft Office software	✓ Carry case				
✓ Printer	✓ Other electronic devices such as Ipad				
✓ Cables to connect the printer	✓ Internet subscriptions				
The maximum allowance for computer technology is \$1,500. Purchases of the items is the responsibility of					
the student. Copies of the original receipts are to be submitted with the Request for Reimbursement Form.					
You will receive written notification of the approval/disapproval of this allowance. <i>Students who</i>					
withdraw are required to reimburse the Higher Education Program in accordance with V. Withdrawal					
for the amount reimbursed under this allowance					
IOF THE AMOUNT FEIMPUISED UNDER THIS AllOWANCE					

Acknowledgement of Scholarship Fund Policy & BIA Requirements

HIGHER EDUCATION PROGRAM POLICY ACKNOWLEDGEMENT

I have read the SNI-HEP Policy (approved by Tribal Council May 10th, 2025). I understand the contents of the policies and do hereby agree to abide by all terms listed. SIGNATURE: DATE:

BIA HIGHER EDUCATION GRANT/PRIVACY ACT AND PAPERWORK REDUCTION ACT

This information is provided pursuant to Public Law 03-579 (Privacy Act of 1974). Although furnishing personal information to this office is voluntary, failure to supply complete and accurate information may preclude the applicant from eligibility for assistance under this program.

This information is being collected to determine eligibility of individuals applying for services. This information will be used to produce statistical records required of this office of Indian Education Programs. Response to this request

is required to obtain a benefit.

I hereby certify the information on this form is true and correct to the best of my knowledge and consent to the release of this information to necessary agencies to complete my financial aid package. I request that any BIA/SNI grant awarded to me be mailed to the financial aid office of the institution I am attending. I will provide a copy of my grades or transcript to the BIA/SNI Higher Education Office at the end of each term.

SIGNATURE:

DATE:

PARENT SIGNATURE (IF Under 21):

DATE:

CERTIFICATE OF AGREEMENT

For the reasons given in the preamble, Part 40 of Title 25, Chapter I of the Code of Federal Regulations is proposed to be revised as set forth: Sec. 40.8:

(a) If your undergraduate degree requires four or fewer academic years, you may take extra years to complete the program, but you must finish a degree in no more than five academic years.

(b) If your undergraduate degree program normally requires more than four academic years, you may take extra years to complete the program, but you must finish a degree in six academic years.

(c) The SNI/BIA Higher Education Program may waive the time limits for hardship caused by special circumstances (d) To remain eligible for continued funding, you must submit a grade report or transcript for each term to the SNI/BIA Higher Education Program. Sec. 40.9 (a) You will be required to pay back any portion of the grant you receive if you, without mitigating circumstances fail to enroll, withdrawal, or expulsion before the completion of a term. (b) Within ten days of your failure to enroll or withdrawal or expulsion you will be required to submit to the SNI/BIA Higher Education Program the date of your failure to enroll, withdrawal or expulsion; and a written statement with supporting documentation stating your request to the institution that all remaining grant funds be returned to the SNI/BIA Higher Education Program. (c) The SNI/BIA Higher Education Program Committee will review all information and notify you in writing of arrangements to pay the balance of funds allocated or grant you a waiver based upon mitigating circumstances.

Signature:_____

Date:

SENECA NATION OF INDIANS SCHOLARSHIP FUND Department of Education

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FERPA Releaser of Information Family Education Rights and Privacy Act,l 1974

This FERPA Release of information form is to be returned to the Seneca Nation Higher Education Program if you want our office to be able to speak freely to and share information with any person(s) at the acdemic institution(s) listed on your SNI BIA Scholarship Application.

Student Name (Please print)

Social Security Number

___/__/___ Date of Birth I, the undersigned hereby authorize the Seneca Nation of Indians Higher Education Program to receive the following information (check all that apply):

____Student Account Information (billing statements, charges, credits, payments, past due amounts)

____ Financial Aid Information (awards, disbursement, eligibility, financial aid academic progress)

____Academic Information (Enrollment status)

____ Other: (please specify)_____

Release information to: _____ SNI Higher Education Program, PO Box 231 Salamanca, NY 14779 Ph (716) 945-1790, ext 3103 Fax (716) 945-7170

> ____ SNI Higher Education Program, 2016 Hënödeyësta Dr. Suite 2, Irving, NY 14081 Ph (716) 532-3341 Fax (716) 532-3269

I understand that (1) I have the right not to consent to the release of my education records, (2) I have the right to inspect any written records released pursuant to this consent, and (3) I have the right to revoke this consent at any time by delivering a written revocation to the Seneca Nation Higher Education Program. This consent shall remain in effect for the ______ Academic Year or until I revoke this authorization in writing.

Student's Signature: _____ Date: _____ This information is released subject to the confindentiality porvisions of appropriate state and federal laws and regulations which prohibit any further disclosure of this information without the specific written consent of the person to whom it pertains, or as otherwise permitted by such regulations.



Seneca Nation Department of Education, HEP

Cattaraugus Territory 2016 Hënödeyësta Drive Suite 2 • Irving, NY 14081 Phone: 716-532-3341 Fax: 716-532-8335

AUTHORIZATION TO RELEASE INFORMATION

In the United States, the Family Educational Rights and Privacy Act (FERPA) of 1974 protects the privacy of student educational records. Therefore, the Seneca Nation of Indians Department of Education cannot release personally identifiable information without prior written consent. A parent does not have the automatic right to view or access the student records of his or her child, unless that child is a dependent less than 18 years of age. Students may grant a third-party (i.e. parent, spouse, relative, friend, organization etc.) access to their student records by completing this form and returning it to the Seneca Nation of Indians Department of Education.

I, ______(print full name), authorize the Seneca Nation of Indians Department of Education to release my information, including but not limited to; Financial Aid information, Award amounts, status of application, class schedules, grades, FAFSA/SAR – to the following individual(s) or organization(s):

Name (First, M.I., Last)	Relationship to Student	Contact phone no.

Student Signature: _____ Date: _____

If you no longer wish for the listed individual(s) or organization(s) to have access to your student records, you must notify the Seneca Nation of Indians Education Department IN WRITING.