

SENECA NATION OF INDIANS SCHOLARSHIP FUND
Department of Education

Higher Education Program
Allegany Territory
PO Box 231
25 Center St.
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
Email: snihighered@sni.org
Web: www.sni.org/hep

DEADLINES : Fall-July 15, Winter-November 1, Spring-December 31, Summer-May 20

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.*
- 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 not provide scholarship funding for Continuing Education or Professional Development courses.
- SNI-HEP will not provide scholarship funding for Student Health Insurance.

It is the Students RESPONSIBILITY to request a waiver of late fees and deferments through 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.
 - 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 *and provide certified receipt of mailing* (where indicated):
- 1.) SNI-HEP application and must be postmarked by the following deadlines:
Semesters: FALL – July 15 *WINTER-November 1 * SPRING - December 31 *
SUMMER – May 20
 - 2.) Free Application for Federal Student Aid Form (FAFSA) at www.fafsa.ed.gov
 - 3.) NYS Tuition Assistance Program (TAP) application at www.hesc.ny.gov
 - 4.) Part-time students attending within NYS must complete Assistance for Part-time Students (APTS) application – See College for appropriate deadline

- 5.) NYS Indian Aid application – Copy then mail *with certified receipt; receipt to be placed in students SNI/HEP file as proof of submission* by the following deadlines: FALL – July 15 * SPRING – December 31 * SUMMER – May 20
 - 6.) Full-time Graduate Students must apply for a fellowship through (AIGC): Annual Deadline: June 1. Please Note: Applications ONLY available on-line.
 - 7.) Students residing out-of- state are required to apply for their respective state grants.
- 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, AIGC 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 receipt.
 - E. Notify the SNI-HEP in writing of a change in the number of credit hours within ten (10) working days of the change. When you become over-funded, you must repay these funds to the SNI-HEP.
 - F. All students are required to submit a copy of their diploma after completing 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 difference between the financial need and your financial aid offer

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.

Level 3 - Undergraduate and Graduate students with permanent residence outside New York State.

IV. SNI-HEP AWARD

A. Level 1: *up to \$15,000* Level 2: *up to \$12,000* Level 3: *up to \$10,000*

Level awards applied to: Tuition, Fees, Room and Board ONLY.

Maximum award per academic year or 1/2 of maximum per semester.

Quarter/Trimester maximums will be divided accordingly.

- B. Awards are based on allowable expenses minus resources. **Unspent scholarship monies should be returned to the Higher Education Program. This is not an entitlement program.**
- C. Unmet Need awards will be based on availability of funding

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 (excluding parking passes) will be verified each term by the individual school's financial aid office.
- E. Room & Board: a. Double occupancy dormers or college approved housing.
 b. Full-time Enrollment only
- The following awards will be available to all eligible students (dependent upon curriculum/schedule/need)
- F. Books: a. Full-time student limit of \$700 per semester/\$1400 per year.
 b. Part-time rate of \$140 per three (3) credit hours.
- G. Transportation: 1) COMMUTERS ONLY
 a. Full-time student limit of \$500 semester/\$1000 per year.
 b. Part-time student limit of \$100 per three (3) credit hours.
- H. Supplies: a. Full-time student limit of \$300 semester/\$600 per year.
 b. Part-time student is based on \$60 per three (3) credit hours.
- I. Technology Expense: a. Computer Allowance; including software and peripherals:
 1x per student - limit of \$1200 (*justification required*)
 SNI will not be responsible to replace lost/broken/stolen items.
- J. Equipment/Tools a. Required tools/equipment for certificate programs:
 1x per student: limit \$1200 (*justification required*)
 SNI will not be responsible to replace lost/broken/stolen items.
- K. License/Certificate Expense: a. Allowance based on program of study (1x per student)
- L. Childcare Expense: a. Full-time students allowance \$750/semester
 b. Part-time students allowance \$375/semester

V. WITHDRAWAL

- A. Withdrawal from College: The students must notify the SNI-HEP in writing within 10 working days of withdrawal. The SNI-HEP refund must be returned to the program. The student is responsible for repayment of all SNI-HEP monies. If the student fails to repay the funds, they will automatically forfeit future eligibility for SNI-HEP funding.
- B. Drop or Withdrawal from Classes:
Full-time students must notify the SNI-HEP in writing within 10 working days of dropping or withdrawing from a class if your change causes you to go from Full-time to Part-time. If your payment has already been made, the student must repay or make arrangement to repay the SNI-HEP. Failure to do so will automatically forfeit your eligibility for future funding.
Part-time students must notify the SNI-HEP in writing 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 automatically forfeit your eligibility for future funding.

VI. OVERFUNDING

Students who are OVERFUNDED, will be required to repay these funds to the SNI-HEP. This includes Full and Part-time students. Eligibility for 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

A Grade Point Average (GPA) below a 2.0 will result in a student being placed on Academic Probation for the next term, and is still eligible for funding. The student must then achieve a GPA of 2.0 or higher in the next term or their funding will be denied for the next term. If a student is denied funding for academic reasons, the student may have funding restored when he/she submits proof reflecting GPA of 2.0 or higher. A student will be allowed one (1) academic probation per degree.

IX. ELIGIBILITY RESTORATION

Restoration of Eligibility can be returned only through formal action.

A. Process for Restoration

- 1) The student must submit a written request for a review of eligibility to the Higher Education Coordinator.
- 2) The Education Department Director will review the request and render a decision.

B. Process for Appeal of Decision

- 1) A hearing request in writing must follow within 10 business days of decision, only if the student does not agree with the Director's determination.
- 2) The hearing will take place within 10 business days upon receipt of the hearing request.

X. ONLINE PROGRAMS

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

SNI SCHOLARSHIP FUND POLICY ACKNOWLEDGMENT

I have read the BIA SNI Scholarship Fund Policy (approved by Tribal Council July 24, 2003, revised September 28, 2016). I understand the contents of the policies and do hereby agree to abide by all terms listed.

SIGNATURE:

DATE:

Application & Documentation Requirements

DOCUMENTATION-All students must submit the following, please indicate the items that you are submitting with your application: **Final processing date is 30 days from receipt of application.**

**Submitted Items &
Date submitted**

ALL STUDENTS – INCLUDING “NEW APPLICANTS”

FAFSA Submission Confirmation Page or Student Aid Report (SAR)

State Aid Submission Confirmation

State Indian Aid Submission Confirmation or 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

Semester/Term itemized bill which shows current charges

**Submitted Items &
Date Submitted**

“NEW APPLICANTS” ONLY-(must submit items listed above also)

Official Tribal Certification

Copy of HS Diploma or GED

College Transcript(s)

Personal Letter of Educational Goal

Letter of Reference (not a relative)

Letter of Acceptance College/ Vocational/ Technical Training Program

College Financial Aid Award Letter

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 this application. I also understand that it is my responsibility to make sure the above items are received by the HEP office.

Student signature: _____

Date: _____

SENECA NATION of INDIANS SCHOLARSHIP APPLICATION

Name	_____	Tribal Enrollment #	_____
Maiden or Former Names Used	_____	College ID #	_____
Parent/Guardian Name(s)	_____	Date of Birth	_____
Current Physical Address:	_____	City/ST/ZIP	_____
*Proof may be required	_____		
Mailing Address:	_____	City/ST/ZIP	_____

Home Phone:	_____	Cell Phone:	_____
Email Address:	_____	Cell-Text Capable?	Yes No

If previously funded by SNI HEP, When (Semester and Year)? _____

Current College : _____

College Address:
(City,State,Zip) _____

Semesters & Year applying for: FALL 20__ WINTER 20__ SPRING 20__ SUMMER 20__
(can check more than one)

Student Status: ___ Full-time Student (12+ Credits) ___ Part-time Student (less than 12 credits)

Student Level: ___ Undergraduate : Freshman Sophomore Junior Senior
___ Graduate

Housing Plan: ___ Campus Approved Housing-select this option only if you are full-time, living on campus or in officially approved housing by the college AND in a double occupancy or higher living quarters.
___ Off-Campus or Commuter with Parents

Degree Type: AA AS BA BS MA MS Other_____

Major: _____ Minor/Concentration: _____

Anticipated Graduation Date: _____

SNI SCHOLARSHIP APPLICATION – Certificate Programs

Vocational or Technical
Program:

Institution/Facility Name:

City, State, Zip

Phone # ()

Program of Study:

FT: _____ hrs. per week PT hrs. per week _____

Expected Completion Date:

Licensure Required Upon Certification Completion 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.** Allow up to 30 days for processing.

Allowable items:	Items not covered:
<ul style="list-style-type: none"> ✓ Tools ✓ Specific shoes ✓ Specific uniform ✓ Safety glasses ✓ Equipment such as items used in a nursing program 	<ul style="list-style-type: none"> ✓ Business attire ✓ Optional tools/equipment ✓ Items not on the required list

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.

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:

Items allowed:

- ✓ Desktop computer
- ✓ Laptop
- ✓ Microsoft Office software
- ✓ Printer
- ✓ Cables to connect the printer

Items not covered:

- ✓ Tablet
- ✓ Notebook
- ✓ Ink cartridges (covered under Supplies)
- ✓ Carry case
- ✓ Other electronic devices such as Ipad
- ✓ Internet subscriptions

The maximum allowance for computer technology is \$1,200. 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. ***Students who withdraw are required to reimburse the Higher Education Program in accordance with V. Withdrawal for the amount reimbursed under this allowance***

Acknowledgement of Scholarship Fund Policy & BIA Requirements

HIGHER EDUCATION PROGRAM POLICY ACKNOWLEDGMENT

I have read the SNI-HEP Policy (approved by Tribal Council July 24, 2003). 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 reasons for failure to enroll, withdrawal or expulsion including mitigating circumstances; and a copy of 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: _____

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FERPA Releaser of Information
Family Education Rights and Privacy Act, 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 academic institution(s) listed on your SNI BIA Scholarship Application.

_____ Student Name (Please print)	_____ Social Security Number	_____/_____/_____ Date of Birth
_____ College/University or Voc. Technical Institute	_____ Student ID Number	_____ Student Phone number

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 Hënódeyësta 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 confidentiality provisions 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
 Allegany Territory
 PO Box 231 • Salamanca, NY 14779
 Phone: 716-945-1790

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.