

**COPPERMINE CHAPTER**  
**SCHOLARSHIP PROGRAM POLICIES AND PROCEDURES**

**I. INTRODUCTION:**

The General Fund for scholarship is allocated to Coppermine Chapter at the discretion of the Navajo Nation Council, Funds are disbursed depending on availability of funds to assist eligible college bound students with limited financial assistance.

**II. PURPOSE:**

The Coppermine Chapter Scholarship Program Policy and Procedures is hereby established to regulate and Provide guidance in the implementation and distribution of available Chapter Scholarship Fund to eligible Students to assist with high educational and/or technical field training related expenses only.

**III. ELIGIBILITY REQUIREMENT:**

1. Student and parents or legal guardians must be active registered voters of Coppermine Chapter each fiscal year.
2. Student must be currently enrolled as a full-time (minimum of 12 credits or four classes) or part-time (4 credits to 11 credits or two to three classes)
3. Students must maintain enrollment statue throughout the semester.
4. Student must maintain an academic requirement of 2.5 or higher grade point average.
5. Student shall only be allowed two (2) assistance during each fiscal year.
6. Student must not have been assisted from other Chapters during the academic year.

**IV. DOCUMENTS REQUIREMENTS:**

1. Coppermine Chapter Scholarship Program application.
2. A copy of Letter of Admission from College, University of Training Institution's Admission Department.
3. Current enrollment verification from the Institution for continuing students.
4. A copy or verification of Coppermine Chapter Voter Registration.
5. A copy of Certificate of Indian Blood (CIB), Social Security Card and current Photo ID Card.
6. Complete Authorization for Release of Information Form.
7. Official High School Transcript/GED score for first time applicants.
8. A sealed Official College Transcript of the most recent college for continuing students.

**V. POLICIES:**

- A. The Scholarship Funds for a full-time and part-time College, University or Vocational Training students shall be awarded in accordance to the fiscal year chapter approved budget.
- B. A student and parents or legal guardian must be registered with the Coppermine Chapter six (6) months prior to the application deadlines date.
- C. Incomplete application packets shall not be accepted.
- D. Faxed, email or emailed application packets shall be accepted.
- E. All original documents shall be submitted by the following deadlines dates. Fall/Winter Semester-Last Friday in August. Spring Semester-Second Friday in January, Summer Semester-Last Friday of May at 5pm.

**VI. PROCEDURES:**

- A. Applicants shall pick up, fill out and return completed scholarship application packet to the Chapter Administration Office before deadlines dates before 5pm.
- B. Applicants shall pick up, fill out and return completed enrichment application packet to the Chapter Administration Office upon completion.
- C. The Chapter Administration shall review the application and immediately notify the student, parent(s), and/or legal guardian of any missing documents utilizing the Checklist at the time of submittal.
- D. The Account Maintenance Specialist shall log-in and stamp all completed applications packets received.
- E. Completed application packet shall be forwarded to the Community Service Coordinator for consideration.
- E. Applicants shall be notified in writing, emailed, or phone called about whether he/she is denied or approved for scholarship and/or enrichment funding for full-time \$500.00 and part-time \$250.00 be awarded.

**VII. AMENDMENTS:**

The Coppermine Chapter shall strictly abide and comply with set Policies and Procedures unless otherwise changes or amendments have been made to the Chapter Scholarship Program. The process to amend the Policy And Procedures shall be recommended in writing by any registered community members at a duly call Chapter Planning meeting.





## COPPERMINE CHAPTER CHAPTER ASSISTANCE APPLICATION FORM

*Applicant's are required to fill out a new application form for each assistance  
Incomplete application forms will NOT be accepted*

**\* MUST BE A REGISTERED VOTER WITH COPPERMINE CHAPTER IN ORDER TO RECEIVE ASSISTANCE**

Name of Applicant \_\_\_\_\_ Date \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_  
 Social Security # \_\_\_\_\_ Census # \_\_\_\_\_

Please submit the following:

Certificate of Indian Blood  Photo ID  Voter Registration Card

### TYPE OF ASSISTANCE REQUESTED

Chapter Scholarship <input type="checkbox"/>	Hay <input type="checkbox"/>	Facility Usage <input type="checkbox"/> <small>*\$50.00 fee + NN tax</small>
Funeral <input type="checkbox"/>	Fuel <input type="checkbox"/>	Firewood <input type="checkbox"/>
Medical <input type="checkbox"/>	Water <input type="checkbox"/>	Veteran <input type="checkbox"/>
Utilities <input type="checkbox"/>	Emergency <input type="checkbox"/>	Housing Materials <input type="checkbox"/>
Student Enrichment <input type="checkbox"/>	Solar Panels <input type="checkbox"/>	Clearances: Arch. & Environmental <input type="checkbox"/>
Public Employment Project <input type="checkbox"/>	Weatherization <input type="checkbox"/>	
Other: <input type="checkbox"/>	<u>Explain</u>	

### INCOME VERIFICATION OF HOUSING UNIT

Name of each household member, including self	Age	Relationship to self	Monthly Income	Source of Income
		<i>self</i>		

Signature of Recipient \_\_\_\_\_ Date \_\_\_\_\_

### FOR OFFICE STAFF ONLY

Date of Acceptance \_\_\_\_\_ Accepted By \_\_\_\_\_

Approved  Denied  Fee Waived Approved Yes / No

Comments \_\_\_\_\_

Resolution Number	Date	Amount Awarded	Check Number	Initial





# COPPERMINE CHAPTER SCHOLARSHIP ASSISTANCE PACKET

\*Applicant's are required to fill out a new application form for each assistance  
\*Incomplete application forms will NOT be accepted

## REQUIRED DOCUMENTS TO BE SUBMITTED WITH APPLICATION

**\* THE COPPERMINE CHAPTER ADMINISTRATION WILL NOT MAKE COPIES FROM PREVIOUS APPLICATIONS UNDER ANY CIRCUMSTANCES**

**Checklist**

- 1  Complete Student Financial Assistance Application  
*\*Must be completed by **Applicant/ Student***
- 2  Complete Authorization for Release of Information Form
- 3  Complete Coppermine Chapter Financial Assistance Application
- 4  Copy of Coppermine Chapter Voter Registration card or receipt  
*\*Must be a registered voter of Coppermine Chapter for six (6) months before applying*
- 5  Copy of current Photo ID/ Social Security Card
- 6  Copy of Certificate of Indian Blood
- 7  Official High School Transcript/ GED score for first time applicants
- 8  Official/ Original Certification of Enrollment/ Letter of Admission  
*\*Student must be accepted from an **accredited college or university***
- 9  Sealed (Original) College Transcript  
*\* Returning students- updated transcript from previous semester*

## REQUIREMENTS TO BE MET BY APPLICANT

Initial \_\_\_\_\_

- \* Presentation at Coppermine Chapter Planning/Report and/or Regular Chapter Meeting
- \* I have read and understand the Coppermine Chapter Student Financial Assistance Policy and Procedures
- \* Maintain at least a 2.50 minimum grade point average or higher
- \* Submit all documents by the deadline

DEADLINE FOR APPLICATION TO BE SUBMITTED	
Fall/ Winter Semester/ Quarter	Last Friday in August
Spring Semester/ Quarter	Second Friday in January
<i>* During this time, the Chapter has tax obligations to fulfill. PLEASE submit applications on time</i>	
Summer Session	Last Friday in May

## FOR OFFICE USE ONLY

Name of Applicant: \_\_\_\_\_ Fiscal Year \_\_\_\_\_

Date Received: \_\_\_\_\_ By: \_\_\_\_\_

Resolution Number	Date	Semester Awarded	Amount Awarded	Check No.	Initial





## COPPERMINE CHAPTER

### Student Financial Assistance Application- Scholarship

*\* MUST BE A REGISTERED VOTER WITH COPPERMINE CHAPTER IN ORDER TO APPLY*

*\* IF UNDER THE AGE OF 18, THEN PARENTS/GUARDIAN HAVE TO BE REGISTERED VOTERS*

TERMS APPLYING FOR:	
20 _____	Fall/Winter Semester/Quarter
20 _____	Spring Semester/Quarter
20 _____	Summer Session

STUDENT INFORMATION				
Legal Name: (Last, first, middle)		Date	Telephone/ Cell Phone Number	
Social Security #	Census #	Date of Birth	Gender	Marital Status
Email Address		Spouse's Name		No. of Children
Current Mailing Address: City/State/Zip			Are you a Veteran? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Permanent Mailing Address: City/State/Zip			Military Service Branch & Year Served	
Mother's/ Guardian's Name	Current Mailing Address: City/ State/ Zip		Chapter Affiliation	
Father's/ Guardian's Name	Current Mailing Address: City/ State/ Zip		Chapter Affiliation	

EDUCATION				
High School	City	State	Month & Year of Graduation or GED Certificate:	
College/University	City	State	Major	Type of Degree Sought
Expected Graduation Date	College Classification Freshman <input type="checkbox"/> Sophomore <input type="checkbox"/> Junior <input type="checkbox"/> Senior <input type="checkbox"/>			Graduate <input type="checkbox"/> Post Graduate <input type="checkbox"/>
Have you ever been assisted from Coppermine Chapter Scholarship Financial Assistance Program? No <input type="checkbox"/> Yes <input type="checkbox"/> When? _____ Amount Received _____				
Have you ever been assisted from another Chapter, Navajo Nation, other entities for Scholarship Financial Assistance Program? No <input type="checkbox"/> Yes <input type="checkbox"/> When? _____ Amount Received _____				
Name of Financial Advisor or Scholarship Provider			Phone Number	

*I certify that the above information is correct to the best of my knowledge.*

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

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

Print Name : \_\_\_\_\_

# COPPERMINE CHAPTER

## STUDENT FINANCIAL ASSISTANCE FOR APPLICATION- SCHOLARSHIP

### AUTHORIZATION FOR RELEASE OF INFORMATION

I, \_\_\_\_\_ HEREBY, AUTHORIZE THE COPPERMINE CHAPTER  
TO VERIFY THE INFORMATION GIVEN BY ME ON THE CHAPTER SCHOLARSHIP  
APPLICATION. AND GIVE MY CONSENT FOR COPPERMINE CHAPTER TO RELEASE ALL  
INFORMATION GIVEN BY ME, TO THE NAVAJO NATION SCHOLARSHIP OFFICE IN  
WINDOW ROCK, ARIZONA. FURTHER, I, HEREBY, RELEASE ALL PERSONS  
ORGANIZATIONS FROM LIABILITY FOR PROVIDING LEGALLY-RELEVANT INFORMATION  
IN CONNECTION WITH MY CHAPTER SHCOLARSHIP APPLICATION.

SIGNATURE: \_\_\_\_\_

PRINT NATE: \_\_\_\_\_

DATE: \_\_\_\_\_