



AGREEMENT

I, _____ am applying for funding for _____.
I agree to abide by the required rules and regulations set forth by the Education Program and the Shoshone Business Council.

I also understand that the funding is subject to the availability of funds and the amount is subject to change by the Shoshone Business Council. If I do not continue the Class/Certification/Training for which I am funded or do not meet standards, the funding will need to be paid back to the Eastern Shoshone Education Program.

I will contact and submit an explanation in WRITING to the Education Office indicating my reason(s) for **not completing the class/certification/training** within 30 days of the last day classes were attended. I understand a request of waiver for repayment may be requested and that the decision of the Shoshone Business Council is FINAL.

If a student fails to voluntarily pay back the approved and funded amount, then the Shoshone Business Council will take action to deduct said amount from the Shoshone Tribal Individual Monies (Welfare Benefit) and/or payroll.

I understand entirely the requirements and conditions of the funding and certify that the information on the application is correct, true and submitted with my approval.

****PLEASE READ AND INTIAL THE FOLLOWING REQUIREMENTS IF YOU AGREE TO FOLLOW THEM ENTIRELY****

_____ I agree to maintain **complete the class/certification/training** that I will be attending.
(initial here)

_____ I agree to **complete** ALL approved credit hours as required.
(initial here)

_____ I agree to contact the Education Office in WRITING if I decide not to complete. No contact can result in
(initial here) suspension from the program.

_____ I assume full repayment of the funding to the Eastern Shoshone Education if I do not complete the
(initial here) class/certification/training.

_____ I agree to submit documentation of completion. Failure to do so will result in paying back the funds.
(initial here)

_____ I agree to **not** use social media services or sites, or any other websites, to disparage the Eastern Shoshone
(initial here) Education Program. As a scholarship recipient I may not harass, bully or intimidate others. Behaviors that constitute harassment and bullying include, but are not limited to, comments that are derogatory with respect to race, religion, gender, sexual orientation, color, or disability; sexually suggestive, humiliating, or demeaning comments.

_____ I agree to **not** post any material that is obscene, defamatory, profane, libelous, threatening, harassing,
(initial here) abusive, hateful or embarrassing to the Eastern Shoshone Education Program when posting to or accessing any social media site.

_____ I agree to the Appeal Process (in the handbook).
(initial here)

*****PAYMENT PLAN:** A payment plan must be made with the Education Program within 30 days after non-completion of the program. Failure to do so will result in a suspension of future funding and Shoshone Tribal Individual Monies (Welfare Benefit) and/or payroll deductions until said amount is repaid in full.

I HAVE READ THE ABOVE STATEMENT(S) REGARDING THE ACCEPTANCE AND USAGE OF THE SHOSHONE EDUCATION FUNDING AND I UNDERSTAND THE POLICIES AS THEY APPLY TO ME AND THE CONSEQUENCES NOTED.

Signature

Date