



Caddo Nation Education Department

Higher Education Program Application

P.O. Box 487 - Binger, OK 73009

(405) 656-2344, Ext. 2055

Fax: (405) 656-0961

Dear Student: (PLEASE READ THIS PAGE AND THE NEXT CAREFULLY!)

This is the Caddo Nation Higher Education Program (CNHEP) application packet. To be considered for a scholarship, applicants must submit the application and as many of the documents listed below to the above address by the due date. ***DUE DATES: Fall-July 15th, Spring-November 15th.***

STUDENT MUST NOT HAVE ALREADY RECEIVED THEIR FIRST BACHELOR'S DEGREE.

NEW APPLICATIONS:

1. Completed & Signed Higher Education Application
2. Signed and dated Student Agreement
3. Copy of Caddo Nation Enrollment Card
4. Official High School Transcript, GED Certificate, or Official College Transcript.
5. Copy of Institutional Acceptance Letter.
6. Financial Needs Analysis (FNA) form completed, signed & submitted by school Financial Aid Office. Student must complete the Free Application for Federal Student Aid (FAFSA) so this form can be completed. Scholarship amounts are dependent on the amount shown for "Unmet Need". A scholarship will not be awarded without a completed FNA.
7. Verification of Enrollment (VOE) form, signed and stamped by the Registrar. *The VOE may be submitted after the due date, but it must be on file before scholarship will be released.*

RENEWAL APPLICATIONS:

1. Completed & Signed Higher Education Application
2. Signed and dated Student Agreement
3. Official College/University Transcript for the last term funded.
4. Financial Needs Analysis (FNA) form completed, signed & submitted by school Financial Aid Office. Student must complete the Free Application for Federal Student Aid (FAFSA) so this form can be completed. Scholarship amounts are dependent on the amount shown for "Unmet Need". A scholarship will not be awarded without a completed FNA.
5. Verification of Enrollment (VOE) form, signed and stamped by the Registrar. *The VOE may be submitted after the due date, but it must be on file before scholarship will be released.*

*If there are significant changes, such as transferring to another school,
a new mid-term application will be required.*

**ORIGINAL DOCUMENTS MUST BE SUBMITTED.
FAXES/COPIES/EMAILS WILL NOT BE ACCEPTED!**



Caddo Nation Education Department

Higher Education Program Application

P.O. Box 487 - Binger, OK 73009

(405) 656-2344, Ext. 2055

Fax: (405) 656-0961

SELECTION PROCESS:

- All applications will be reviewed on an individual basis and approved or rejected based upon eligibility and application criteria. The Caddo Nation Education Office will notify applicant and the Financial Aid Officer, in writing, of the application determination.

CONTINUED FUNDING:

- Full-time students **MUST COMPLETE** 12 or more hours per academic term. Part-time students must be enrolled in 6-11 hours per academic term.
- All students must achieve and maintain a semester and cumulative Grade point Average (GPA) of 2.0 on a 4.0 grade point scale.
- Students shall continue to be eligible for funding for 10 terms/semesters as long as they meet the above listed criteria.

PROBATION/SUSPENSION:

- Failure to meet the academic standards for continued funding shall result in being placed on probation for one term/semester. While on probation, if the minimum GPA of 2.0 is not achieved, the student will be suspended from the Caddo Nation Higher Education Program (CNHEP). While on suspension, the student will not be considered for additional funding until such time that the student has completed 12 full hours with a GPA of 2.0 while utilizing other funding sources.

PRIVACY STATEMENT

The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C 1232g; 34 CFT Part 99) is the Federal law that protects the privacy of student education records. The law applies to recipients who receive Federal funding for educational purposes. These rights transfer to the student when he or she reaches the age of 18 or attends a school beyond the high school level.

WITH THIS STATED AND IN ACCORDANCE WITH THE FERPA, THE CADDO NATION EDUCATION DEPARTMENT WILL DISCUSS STUDENT INFORMATION WITH THE STUDENT APPLYING FOR ASSISTANCE ONLY.

*****REMINDER*****

**STUDENT MUST NOT HAVE ALREADY RECEIVED
THEIR FIRST BACHELOR'S DEGREE.**

**ORIGINAL DOCUMENTS MUST BE SUBMITTED.
FAXES/COPIES/EMAILS WILL NOT BE ACCEPTED!**



Caddo Nation Education Department

Higher Education Program Application

P.O. Box 487 - Binger, OK 73009

(405) 656-2344, Ext. 2055

Fax: (405) 656-0961

NEW APPLICATION

RENEWAL APPLICATION

Applying for: Academic School Year 20____/20____

Fall

Spr

Part I – Applicant Information: (PLEASE COMPLETE ALL BLANKS)

Name: _____
Last First MI (Maiden name)

Home Address: _____
Street No./ Route/PO Box

_____ City State Zip

SSN: _____ DOB: _____ Caddo Membership No: _____

Home Phone No. _____ Cell Phone No. _____ E-mail _____

Part II – Academic Information: (PLEASE COMPLETE ALL BLANKS)

Name of College/University: _____

Address: _____

_____ City State Zip

Classification: Freshman Sophomore Jr. Sr. Other: _____ Accumulative Hrs. _____

Major: _____ Minor: _____ Expected Graduation Date: _____

Degree Sought: AA AS AAS BA BS Other _____

Have you received CNHEP funding before? Yes No

If so, what was your last term funded? _____ Current Enrollment Status: Full-time Part-time

I declare that the information given by me on this form is true, correct and complete to the best of my knowledge. I consent to this information being shared by the Caddo Nation, my selected higher education institution, and other necessary agencies to complete my financial aid package. I will contact the Financial Aid Office and apply for any financial aid available to me, and if granted assistance from the Caddo Nation, I am aware the scholarship will be mailed directly to my school's Financial Aid Office. I agree to use the funds only for my approved educational expenses.

Student Signature

Date



Caddo Nation Education Department

Higher Education Program Application

P.O. Box 487 - Binger, OK 73009

(405) 656-2344, Ext. 2055

Fax: (405) 656-0961

CNHEP STUDENT AGREEMENT

I, _____, agree to abide by all of the Caddo Nation Higher Education Program rules, regulations and policies.

I understand that my Cumulative Grade Point Average (CGPA) from any previous college(s) must be 2.0 or higher to enter the Caddo Nation Higher Education Program (CNHEP).

I understand that as a participant in the CNHEP I must be enrolled in 6 to 11 credit hours to be considered as a part-time student, or 12 or more hours to be considered as a full-time student, and will maintain a term Grade Point Average (GPA) and a CGPA of 2.0 or higher. I will submit timely grade reports, as issued by the college or university for each term funded to the Caddo Nation Education Department.

If I do not meet academic requirements, I will be placed on academic probation for the following academic term. While on academic probation, I must complete 6 to 11 credit hours if previously enrolled as a part-time student, or 12 or more hours if previously enrolled as a full-time student, AND have a CGPA and term GPA of 2.0 or higher.

I understand that failure to meet academic requirements shall result in suspension from the CNHEP. I understand that students suspended from the CNHEP shall not be considered for future funding until they have: (1) utilized other funding sources for one semester of enrollment, AND (2) completed a minimum of 6 to 11 credit hours if previously enrolled as a part-time student, or 12 or more credit hours if previously enrolled as a full-time student for one semester of enrollment AND have a CGPA and term GPA of 2.0 or higher.

In the event I withdraw from classes or from college, I will immediately notify the Caddo Nation Education Department in writing, and understand that I may be placed on probation or suspended from the Caddo Nation Higher Education Program by doing so.

I further understand that if I am pursuing a first-time degree and cannot complete either a four or five year baccalaureate degree program or cannot meet the associate degree requirements within two or three academic years, I must submit transcripts of grades and program plans to this office for review. A determination of my eligibility for an extension to complete a degree will be made and notification sent to me. In no case shall the extension exceed an academic year beyond the program plan.

I also understand that persons submitting or causing to be submitted any false information in connection with any application, report, or other document, upon which the provision of Federal financial assistance or any other payment of Federal funds is based, may be subject to criminal prosecution under provisions such as sections 287, 371, or 1001 of title 18, U.S. Code.

I FULLY UNDERSTAND THE CONTENTS OF THIS AGREEMENT AND ACCEPT ALL OF THE ABOVE CONDITIONS.

Student's Signature

Date

FINANCIAL NEEDS ANALYSIS FORM

Part 1 – To Be Completed by Student (PLEASE COMPLETE ALL BLANKS)

(Print) Name: _____ Student ID or SSN: _____
Last First MI

Address: _____
St. No./Route/POB

City State Zip

Authorization for Release of Information

I authorize the college/university to release financial and academic information on this Financial Needs Analysis Form, to the Caddo Nation Education Department.

Student Signature Date
Student: Do not make any marks below this point and submit to your school's Financial Aid Office.

Part 2: To Be Completed by Financial Aid Administrator/Counselor (PLEASE COMPLETE ALL BLANKS)

- Student applied for financial aid for the current academic year.
- Student has not applied for financial aid. Need cannot be determined.
- Student's application is incomplete and cannot be considered.

Applicant is: Full-time Part-time. Applicant is enrolled in how many hours? _____

BUDGET PERIOD: From: _____ To: _____ Start Date: _____

-----College Expenses-----	-----Resources/Awards/Scholarships-----
Tuition \$ _____	Parental \$ _____ Pell Grant \$ _____
Fees \$ _____	Student/Spouse \$ _____ SEOG \$ _____
Room/Board \$ _____	Student Incentive _____ CWS \$ _____
Books \$ _____	Grant \$ _____ Stafford loan \$ _____
Travel \$ _____	College/Univ. _____ Perkins loan \$ _____
Misc. \$ _____	Scholarship \$ _____ Plus loan \$ _____
Personal \$ _____	Federal SLS \$ _____ Tuition Waiver \$ _____
Other \$ _____	College/Univ. \$ _____ Voc. Rehab. \$ _____
TOTAL \$ _____	funded loan \$ _____ Dir. Tribal Asst. \$ _____
	Veteran's Asst. _____ Other (i.e. EFC) \$ _____
	TOTAL \$ _____ TOTAL \$ _____

Total Expenses \$ _____ Total Resources, Awards & Scholarships: \$ _____

Student's unmet need is \$ _____ Unmet Need = (Expenses – [Resources + Awards & Scholarships])

Please Note: If the student is eligible for a grant, we will send the award to the Financial Aid Office at the address below.

 Signature of Financial Aid Officer Date Phone Number

 College/University Address City/State/Zip

Financial Aid Administrator: Our established deadline dates are July 15 for Fall & Nov. 15 for Spring. However, we hope your office will return this form completed, to the best of your ability, at your earliest convenience regardless of the date. Our address is: Caddo Nation Education Dept., P.O. Box 487, Binger, OK 73009



Caddo Nation Education Department

Higher Education Program Application

P.O. Box 487 - Binger, OK 73009

(405) 656-2344, Ext. 2055

Fax: (405) 656-0961

VERIFICATION OF ENROLLMENT

Dear College/University Official: This form, complete with your original signature, is required to be in the Caddo Nation Education Department before the student's grant check can be mailed to your institution's Financial Aid Office. To authenticate this verification process, please affix your institution's seal or stamp in the space provided and mail it to the Caddo Nation Education Department at your earliest convenience.

If your institution provides an Official Verification of Enrollment form/letter, or one is provided through a Student Clearinghouse, please send such forms directly to the Caddo Nation Education Department.

Student's Signature

Student's Printed Name

Student ID #

The above student is enrolled for the academic term: _____ at:

(Name of Institution, address, city, state, zip)

This document certifies that the above named student is:

A. _____ Enrolled full-time carrying _____ semester hours.

B. _____ Enrolled part-time carrying _____ semester hours.

I certify the information provided above is accurate according to our admission records.

Signature of Registrar/Admissions/Counselor

Printed name for above signature

Date

Please place
school stamp or seal
here