

# WINTU EDUCATION & CULTURAL SCHOLARSHIP APPLICATION

**For University, College, Technical or Vocational Training**

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

Deadline: First Monday in May

Return to: WECCNC P.O. Box 762, Weaverville, CA 96093

Call for more information: Tracy Foster-Olstad @ (530) 776-3074

## Personal Information

Full Name: \_\_\_\_\_

(Last Name)

(First Name)

(Middle Name)

Address: \_\_\_\_\_

Mailing Address if different from above:

\_\_\_\_\_

Phone: \_\_\_\_\_

(Home #)

(Cell #)

E-Mail Address: \_\_\_\_\_

Age: \_\_\_\_\_ Date Of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Tribal Affiliation: \_\_\_\_\_

(Name of Tribe)

(Location of Tribe)

Are you a California Indian? \_\_\_\_\_

(Roll Number if one)

Is your Tribe Federally Recognized? \_\_\_\_\_

(Roll Number if one)

Do you currently have a job? \_\_\_\_\_ Where? \_\_\_\_\_

Have you participated in community service or volunteering? \_\_\_\_\_

If yes, briefly describe that experience: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_