

# **Higher Education Scholarship Application Packet for Academic Year 2026-2027**

**Application Deadline Date: June 26<sup>th</sup>, 2026**

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To: Higher Education Scholarship Applicants

You've received a Higher Education scholarship application from the Fort Belknap 477 Employment & Training Program. Remember that completing this application before or on the application deadline date, June 26th, 2026, is imperative.

**Application Deadline Date: 06/26/2026**

Students must complete their application packet and have all documentation submitted before/on this deadline. Any applications/documentation received after this date will be considered late. Late applications will be funded only if we have the available funding.

**Required forms & documents:**

**New applicants** must submit application forms #1-3, 4 (if needed), and 5, as well as required documentation #6-13. **Returning applicants** only need to submit application forms #1-3, 4 (if needed), and 5. As well as required documentation #6, 8, and 11. If you require assistance completing this application, please contact us, and the HEP case manager will be available to assist you. (#'s correspond to the numbered list below)

- |                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1) <b>Higher Education Scholarship application</b> ( <i>in packet</i> ) pgs 2-3                                                                                                                                                 | 7) <b>Certificate of Indian Blood Degree</b> ( <i>copy</i> ) – Ft. Belknap Tribal Enrollment Certificate must show $\frac{1}{4}$ or more degree of Indian Blood.<br><i>A tribal ID card will <b>not</b> be accepted as a Tribal Enrollment Certificate.</i><br>Contact the Tribal Enrollment office @ (406) 353-8531 or 353-8532 |
| 2) <b>Intake Form</b> ( <i>in packet</i> ) pgs 4-5                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                  |
| 3) <b>Release Form</b> ( <i>in packet</i> ) pg 6                                                                                                                                                                                | 8) <b>Federal Tax 2025</b> – <i>Copy of your Federal Taxes</i> (1040A; 1040EZ, etc.) or Parents 2025 Federal Tax form if under age 24. Students under age 24 are considered a dependent student, which was determined by the Office of Financial Aid.                                                                            |
| 4) <b>Non-Tax Filer Form</b> ( <i>in packet</i> ) pg 7; complete only if you did not file 2024 Federal taxes; <i>Non-filer tax form must be returned Notarized.</i>                                                             | 9) <b>Photo ID</b> – Clear copy of current, unexpired, photo identification.                                                                                                                                                                                                                                                     |
| 5) <b>Needs Analysis form</b> ( <i>in packet</i> ), pg 8; This form must be completed by the Financial Aid Office at the college you will attend in 2026-27. It is your responsibility to return the form by the deadline date. | 10) <b>Official High School Transcript or Official GED Transcript</b> ( <i>copies will not be accepted</i> )                                                                                                                                                                                                                     |
| 6) <b>FAFSA Submission Summary 2026-2027</b> - Apply online at <a href="http://www.fafsa.gov">www.fafsa.gov</a> . Print the results or Confirmation page. Submission Summary must include the SAI (Student Aid Index)           | 11) <b>Official College Transcript</b> - Applicants who previously attended college must submit an official college transcript from the last college they attended. <i>The transcript must show the Registrar's seal or stamp. (Copies will not be accepted as an official transcript)</i>                                       |
|                                                                                                                                                                                                                                 | 12) <b>College Acceptance Letter</b> - ( <i>copy</i> ) from the college verifying that you have been accepted to attend academic year 2026-27.                                                                                                                                                                                   |
|                                                                                                                                                                                                                                 | 13) <b>Optional: Test Scores</b> —ACT, SAT, or Any College Placement Test (ACCUPLACER, CLEP, COMPASS, ETC.) (Copy) Applicants must have one of these College Placement tests.                                                                                                                                                    |

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**Questions:**

Call Higher Education Office @ (406) 353-2466, 353-8376

**Email:**

Higher.Ed@ftbelknap.org

**Mailing Address:**

Fort Belknap 477 Higher Education Program  
656 Agency Main Street  
Harlem, MT 59526

**Fax Number:**

(406) 353-4567; all faxed forms must be legible. The Original forms must be mailed and postmarked by the deadline date .

# Higher Education Program Scholarship Application

## Academic Year 2026-2027

Ft. Belknap Higher Education Program  
656 Agency Main Street Harlem, MT 59526  
(406) 353-2466, 353-8376

### PERSONAL INFORMATION

|                     |                 |                                 |                                  |                                    |                                   |
|---------------------|-----------------|---------------------------------|----------------------------------|------------------------------------|-----------------------------------|
| First Name          | Middle          | Last Name                       |                                  |                                    |                                   |
| Mailing Address     | City            | State                           | Zip                              | Phone #                            |                                   |
| Social Security #:  |                 | Tribal Enrollment #:            |                                  |                                    |                                   |
| Tribal Affiliation: |                 | Date of Birth:                  |                                  |                                    |                                   |
| Age:                | Marital Status: | <input type="checkbox"/> Single | <input type="checkbox"/> Married | <input type="checkbox"/> Separated | <input type="checkbox"/> Divorced |
| Email Address:      |                 |                                 |                                  |                                    |                                   |

### EDUCATIONAL DETAILS

|                                                |                                   |                                    |                                 |                                 |
|------------------------------------------------|-----------------------------------|------------------------------------|---------------------------------|---------------------------------|
| High School Name/GED                           | Graduation Year:                  |                                    |                                 |                                 |
| Class Standing 2026-27:                        | <input type="checkbox"/> Freshman | <input type="checkbox"/> Sophomore | <input type="checkbox"/> Junior | <input type="checkbox"/> Senior |
| College attending 2026-27:                     |                                   |                                    |                                 |                                 |
| College Address:                               |                                   |                                    |                                 |                                 |
| Estimated Graduation Year:                     | Major:                            |                                    |                                 |                                 |
| Date & Name of college(s) previously attended: |                                   |                                    |                                 |                                 |

### OTHER QUESTIONS

Have you received a Higher Education grant before? ☐ Yes ☐ No

If yes; what year(s):

Sign & date back of application & return to HEP office by the provided Deadline date.

## Higher Education Policies and Procedures

### *Application requirements:*

- 1) To be considered complete, the Higher Education Scholarship application packet must include the required documentation, along with the completed application forms and necessary signatures.
- 2) Higher Education Scholarship application must be complete and received on or before the Higher Education deadline date: **June 26<sup>th</sup>, 2026**
- 3) The scholarship board will not review incomplete scholarship application packets.
- 4) Complete Higher Education scholarship applications received by the deadline will receive priority over applications received after the deadline.
- 5) If your application is late, we cannot guarantee you funding for the applicable academic year. If we have any available funds, we will fund late applications.

### *Guidelines:*

- 1) Enroll in a degree program that leads to a Certificate or Associates/Bachelor's Degree. (There is NO funding for Master's level programs or higher)
- 2) Submit a copy of your student schedule before each semester/quarter starts.
- 3) Submit a copy of your final grade report at the end of each semester/quarter.
- 4) Complete each semester/quarter with a 2.00 GPA (Grade point average) and 12 credits.
- 5) Submit an official copy of your transcript at the end of the academic year.
- 6) If students do not show satisfactory academic progress, the following measures will be implemented:
  - a. First Action: Students who do not complete a semester/qtr with at least 12 credits and a minimum GPA of 2.00, will be placed on academic probation for one semester/qtr.
  - b. Second Action: If students do not improve their academic performance during probation, they will be suspended from the higher education program.
- 7) Notify the Higher Education program if you have any academic changes, decide to withdraw from college or refuse the grant award.

I permit the Fort Belknap Higher Education Program to access my academic and financial records while I am attending an Institution of higher learning and receiving tribal scholarship funding from the Fort. Belknap 477 Employment & Training Higher Education Program.

I \_\_\_\_\_ on \_\_\_\_\_  
Signature Date

Acknowledge the Higher Education Scholarship conditions stipulated.

***Application deadline date: June 26, 2026***

**Higher Education scholarship applications received after the deadline will be considered late.  
*Late applications will be reviewed only if funding is available.***

# Higher Education Scholarship Intake Form 2026-2027

## Section I Personal Information

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security #: \_\_\_\_\_ Phone #: \_\_\_\_\_

Tribal Enrollment # \_\_\_\_\_ Tribal Affiliation: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Are you a veteran? ☐ Yes ☐ No Gender: ☐ Male ☐ Female ☐ Other (Specify): \_\_\_\_\_

Family Status: ☐ Single ☐ Single-Parent Family ☐ Two-Parent Family Total Individuals in Household: \_\_\_\_\_

Total # of dependents under age 18: \_\_\_\_\_ Spouses Name: \_\_\_\_\_

High School Name: \_\_\_\_\_ High School/GED graduation year: \_\_\_\_\_

High School Address/Equivalent Test-site: \_\_\_\_\_

College Name: \_\_\_\_\_ Estimated graduation date: \_\_\_\_\_

Associate/Technology degree: ☐ Yes ☐ No Degree/Certificate Major: \_\_\_\_\_

Class Standing Academic Year 2026-27: ☐ Freshman ☐ Sophomore ☐ Junior ☐ Senior

## Section II Client Characteristics

Labor Force Status: ☐ Employed ☐ Unemployed ☐ Other (Specify): \_\_\_\_\_

Employment Type: ☐ Full-Time ☐ Part-Time ☐ Temporary ☐ Seasonal ☐ Self-Employed

(If Employed) Employer: \_\_\_\_\_ Hourly Wage: \_\_\_\_\_

(If Unemployed) # of Weeks Unemployed: \_\_\_\_\_ Last Hourly Wage: \_\_\_\_\_

Estimated Total Income in last 12 months: \_\_\_\_\_

Are you a recipient of: TANF: ☐ Yes ☐ No If Yes, Benefit start date and amount: \_\_\_\_\_

General Assistance (GA): ☐ Yes ☐ No If Yes, Benefit start date and amount: \_\_\_\_\_

SSI, etc: ☐ Yes ☐ No If Yes, amount you receive: \_\_\_\_\_

Food Stamps: ☐ Yes ☐ No Commodities: ☐ Yes ☐ No Medicaid: ☐ Yes ☐ No

Energy Assistance: ☐ Yes ☐ No Child Care Program: ☐ Yes ☐ No Do you own a vehicle? ☐ Yes ☐ No

### Section III Employment, Training & Education Activities

Check activities you will participate in:

Employment Services:

- ☐ Job Referral
- ☐ Job Search
- ☐ Test Fee

Education/Training:

- ☐ Higher Education
- ☐ Vo-Technical
- ☐ Training Assistance

Supportive Services:

- ☐ Child Care Assistance
- ☐ Transportation
- ☐ Other

### Section IV Educational, Training and Employment Barriers

Check any that may apply to you:

- |                                                                       |                                                               |
|-----------------------------------------------------------------------|---------------------------------------------------------------|
| <input type="checkbox"/> 1) Single Head of Household                  | <input type="checkbox"/> 8) Unemployed/Not in the labor force |
| <input type="checkbox"/> 2) Lack of significant work history          | <input type="checkbox"/> 9) Employed/Low Income               |
| <input type="checkbox"/> 3) Disabled Individual                       | <input type="checkbox"/> 10) No Driver's License              |
| <input type="checkbox"/> 4) Health/Physical restrictions              | <input type="checkbox"/> 11) Transportation                   |
| <input type="checkbox"/> 5) Public Assistance (Food stamps, Medicaid) | <input type="checkbox"/> 12) Budgeting/Money management       |
| <input type="checkbox"/> 6) TANF/GA recipient                         | <input type="checkbox"/> 13) Social issues                    |
| <input type="checkbox"/> 7) Child Care                                | <input type="checkbox"/> 14) Homeless                         |
| <input type="checkbox"/> Other (Specify): _____                       |                                                               |

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Intake Form is due on/prior to the application deadline date.

## CONSENT FOR RELEASE OF INFORMATION

Fort Belknap Higher Education Program  
656 Agency Main Street  
Harlem, MT 59526  
(406) 353-2466, 353-8376  
FAX: (406)-353-4567

I \_\_\_\_\_  
(Print Name) Social Security Number \_\_\_\_\_

am seeking services from the 477 Employment & Training Department. I authorize the 477 Employment & Training Department and all programs therein, to share, exchange, give and receive any information required about my application and the contents therein, in an effort to serve myself. In addition, I authorize the following programs to release to the Higher Education 477 Employment & Training Department. Those agencies are, but not limited to:

Tribal Personnel, Law Enforcement, Short Term Loan Program, Tribal Finance, Commodities, Tribal Credit, Head Start, Tribal Health, Housing Authority, Vocational Rehabilitation Program, Any Tribal Business, Tribal Education, All Colleges/Universities and Technical Institutions, Adult Basic Education, Area Schools, Banks, BIA, Any/All Employers, Veterans Administration, Insurance Companies, Job Services, County Clerk & Recorder, etc.

I understand any/all information by the above named programs/agencies will remain confidential and be used for professional purposes only. I understand that any/all information will not be released without prior knowledge. I understand that I may cancel this consent in writing at any time.

### Information Requested:

College financial data, college grades, federal income tax information, tribal blood quantum, enrollment & class standing information, previous academic records (*if any*), information requested in application packet Pgs. 1-4

### Information Provided (Attach Documentation)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Higher Education Manager

\_\_\_\_\_  
Date

Consent for Release of Information form is due on/prior to the application deadline date.

## Affidavit for Non-Tax Filers

Higher Education Program  
Fort Belknap 477 Employment & Training Department  
656 Agency Main Street  
Harlem, MT 59526

I certify that I did not file the 2025 Federal Income Tax and have no intentions of doing so.

I also certify that all the information on my Free Application for Federal Student Aid (FAFSA) is accurate and complete to the best of my knowledge.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

Subscribed and sworn (or affirmed) before me this \_\_\_\_\_ day of \_\_\_\_\_

\_\_\_\_\_  
Notary Public

State of: \_\_\_\_\_

\_\_\_\_\_  
SEAL

Affidavit Non-Tax Filer form is due on/prior to the application deadline date.



# NEEDS ANALYSIS FORM

## Fort Belknap Higher Education Program

656 Agency Main Street

Harlem, MT 59526

Phone: (406) 353-2466

Fax: (406) 353-4567



**The financial aid office is required to complete the Expenses and Resources section.**

### The Financial Aid Office shall do the following:

1. Complete the FNA only after a student has submitted the required financial aid form (FAFSA/PELL)
2. Consider all financial aid programs for which students qualify when determining the financial aid package.
3. Indicate NE (Not Eligible) next to listed resources for which students do not qualify.
4. Complete each line item under Expenses and Resources.
5. Indicate only the direct educational expenses of the applicant.
6. Report all fellowships and special awards.

ACADEMIC CALENDAR TYPE:

☐ SEMESTER

☐ QUARTER

☐ TRIMESTER

☐ OTHER

COLLEGE NAME: \_\_\_\_\_

STUDENTS LEGAL NAME: \_\_\_\_\_

SOCIAL SECURITY NUMBER: \_\_\_\_\_ MARITAL STATUS: \_\_\_\_\_

#### Expense Items:

#### Resource Items:

|                |          |                     |          |            |          |
|----------------|----------|---------------------|----------|------------|----------|
| TUITION/FEES   | \$ _____ | PERSONAL/SUMMER     | \$ _____ | PELL       | \$ _____ |
| ROOM/BOARD     | \$ _____ | PARENT CONTRIBUTION | \$ _____ | SEOG       | \$ _____ |
| BOOKS/SUPPLIES | \$ _____ | SPOUSE CONTRIBUTION | \$ _____ | SSIG       | \$ _____ |
| TRANSPORTATION | \$ _____ | VETERANS BENEFITS   | \$ _____ | CWS        | \$ _____ |
| PERSONAL       | \$ _____ | SOCIAL SECURITY     | \$ _____ | NDSL       | \$ _____ |
| CHILDCARE      | \$ _____ | OTHER (SPECIFY)     | \$ _____ | FEE WAIVER | \$ _____ |
| TOTAL EXPENSES | \$ _____ | TOTAL RESOURCES     | \$ _____ |            |          |

RECOMMENDED STUDENT NEED TO FB HIGHER EDUCATION PROGRAM: \$ \_\_\_\_\_

(Formula: Expenses – Resources = Student Need)

OFFICIAL USE ONLY- Student Education Expenses 2026-2027:

\_\_\_\_\_  
MONTH YEAR TO MONTH YEAR

\_\_\_\_\_  
CURRENT DATE FINANCIAL AID OFFICER INSTITUTION

\_\_\_\_\_  
PHONE NUMBER EMAIL ADDRESS

## **Higher Education Program**

### **Scholarship Application Checklist 2026-2027**

- Higher Education Application – pages 2-3
- Intake Form - pages 4-5
- Release Form – page 6
- Federal Tax 2025 (**copy**) or Parent's 2025 Federal Tax or **Notarized Non-Tax Filer Form** page 7
- Needs Analysis Form – page 8
- FAFSA Submission Summary 2026-2027 (*copy; Must include the SAI*)
- Certificate of Indian Blood degree (*Enrollment must show one-fourth (1/4) or more*)
- **Official** High School Transcript or **Official** GED/Hi-Set Transcript
- **Official** College Transcript (*must have Registrar's seal or stamp*)
- College Acceptance letter (**copy**)
- Test Scores (**copy; optional**) ACT, SAT, or Any college placement test (ACCUPLACER, CLEP, etc.)
- Photo Identification (**copy**)

### **Higher Ed Scholarship deadline:**

Application deadline date: June 26, 2026

***Applications received after the application deadline date will be considered late. Late applications will be reviewed only if we have the necessary funds. There is no guarantee that late applications will be funded.***

- Mailing Address: Higher Education Program; 656 Agency Main Street, Harlem, MT 59526
- Telephone number: (406) 353-2466, 353-8376
- Fax: (406)353-4567 ~ all faxed forms must be legible due to poor quality.
- **OFFICIAL TRANSCRIPTS MUST BE MAILED or DELIVERED (*faxed transcript copies are NOT Official transcripts and will not be accepted as an official transcript.*)**
- **Required forms must be received or postmarked by the application deadline date.**

**NOTE:** Keep this checklist for your file; keep copies of all required forms.