

**Fort Belknap Higher Education
Program Scholarship
Application Packet for
Academic Year 2025-2026**

Application Deadline Date: June 27th, 2025

Scholarship application packet must be complete.
Incomplete applications will not be reviewed.

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 27th, 2025, is imperative.

Application Deadline Date: 06/27/2025

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:

Applicants must submit application forms #1-3, 4 (if needed), and 5, as well as required documentation #6-13. If you require assistance completing this application, please contact us, and the HEP case manager will be available to assist you.

- 1) **Higher Education Scholarship application** (*in packet*) pgs 2-3
- 2) **Intake Form** (*in packet*) pgs 4-5
- 3) **Release Form** (*in packet*) pg 6
- 4) **Non-Tax Filer Form** (*in packet*) pg 7; complete only if you did not file 2024 Federal taxes; *Non-filer tax form must be returned Notarized.*
- 5) **Needs Analysis form** (*in packet*), pg 8; This form must be completed by the Financial Aid Office at the college you will attend in 2025-26. It is your responsibility to return the form by the deadline date.
- 6) **FAFSA Submission Summary 2025-2026** - Apply online at www.fafsa.gov. Print the results or Confirmation page. Submission Summary must include the SAI (Student Aid Index)
- 7) **Certificate of Indian Blood Degree** (*copy*) – Ft. Belknap Tribal Enrollment Certificate must show ¼ or more degree of Indian Blood. *A tribal ID card will not be accepted as a Tribal Enrollment Certificate. Contact the Tribal Enrollment office @ (406) 353-8531 or 353-8532*
- 8) **Federal Tax 2024** – *Copy of your Federal Taxes* (1040A; 1040EZ, etc.) or Parents 2024 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.
- 9) **Photo ID** – Clear copy of current, unexpired, photo identification.
- 10) **Official High School Transcript or Official GED Transcript** (*copies will not be accepted*)
- 11) **Official College Transcript** - Applicants who previously attended college must submit an official college transcript from the last college they attended. *The transcript must show the Registrar's seal or stamp. (copies will not be accepted as an official transcript)*
- 12) **College Acceptance Letter** - (*copy*) from the college verifying that you have been accepted to attend academic year 2025-26.
- 13) **Test Scores**—ACT, SAT, or Any College Placement Test (ACCUPLACER, CLEP, COMPASS, ETC.) (Copy) Applicants must have one of these College Placement tests.

Questions:

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

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 2025-2026

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

PERSONAL INFORMATION

First	Middle	Last Name
-------	--------	-----------

Mailing Address	City	State	Zip	Phone #
-----------------	------	-------	-----	---------

Social Security #: _____ Tribal Enrollment #: _____

Tribal Affiliation: _____ Date of Birth: _____

Age: _____ Marital Status: Single Married Separated Divorced

Email Address: _____

EDUCATIONAL DETAILS

High School Name/GED _____ Graduation Year: _____

Class Standing 2025-26: Freshman Sophomore Junior Senior

College attending 2025-26: _____

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 27th, 2025**
- 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 27, 2025

**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 2025-26

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 2025-26: 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:

- 1) Single Head of Household
 - 2) Lack of significant work history
 - 3) Disabled Individual
 - 4) Health/Physical restrictions
 - 5) Public Assistance (Food stamps, Medicaid)
 - 6) TANF/GA recipient
 - 7) Child Care
 - 8) Unemployed/Not in the labor force
 - 9) Employed/Low Income
 - 10) No Driver's License
 - 11) Transportation
 - 12) Budgeting/Money management
 - 13) Social issues
 - 14) Homeless
- 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 2024 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 2025-2026

 MONTH YEAR TO MONTH YEAR

 CURRENT DATE FINANCIAL AID OFFICER INSTITUTION

 PHONE NUMBER EMAIL ADDRESS

Higher Education Program

Scholarship Application Checklist 2025-26

- Higher Education Application – pages 2-3
- Intake Form - pages 4-5
- Release Form – page 6
- Federal Tax 2024 (**copy**) or Parent's 2024 Federal Tax or **Notarized Non-Tax Filer Form** page 7
- Needs Analysis Form – page 8
- FAFSA Submission Summary 2025-2026 (*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**) ACT, SAT, or Any college placement test (ACCUPLACER, CLEP, etc.)
- Photo Identification (**copy**)

Higher Ed Scholarship deadline:

Application deadline date: June 27, 2025

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.