

Academic Year 2017-2018



Dear Ho-Chunk Student,

The Higher Education Division is committed to helping you attain your educational and professional goals. In order to be considered for a Ho-Chunk Scholarship, you must meet the following requirements:

- Be an enrolled Ho-Chunk member;
- Be interested/accepted/enrolled in pursuing a progressive degree at an accredited Title IV non-profit institution of higher learning (subject to approval);
- File your Free Application for Federal Student Aid (FAFSA) each academic year;
- Complete the Ho-Chunk Scholarship Application prior to the **absolute deadline (first day of classes)**.

Funding maximums are determined by type of degree program you are interested in and are prorated for part-time attendance. Funding is also determined by standard semester terms, students pursuing coursework online, night classes, or attending quarter based schools. For these particular institutions, your terms will be calculated into an equivalent semester ratio. To be eligible for federal financial aid you must be in an eligible program.

The following is needed to complete the funding process:	Timeline
1. Ho-Chunk Scholarship Application (HSA) Complete one application each academic year *Academic Year includes both fall term and spring term	Please submit HSA early to allow for processing time. The higher education division will not process your HSA after the absolute deadline (first day of classes)
2. File the Free Application for Federal Student Aid (FAFSA)	You may file and/or update online annually at www.fafsa.gov
3. Acceptance Letter: Technical/two-year campus students, program specific acceptance letter Admission Letter: Four year and graduate students	As soon as possible
4. Complete a Ho-Chunk Nation Academic Plan each year; your academic advisor must also sign this document	As soon as possible
5. Submit a copy of your class schedule , include your name, academic term, school name, and number of credits	As soon as you register
6. Submit a copy of the school's detailed billing statement	As soon as it is posted to your student account
7. Submit a copy of your Financial Aid Award Summary provided by the school	As soon as it is posted to your student account
8. Official transcript *Students who previously received funding ONLY ** Mail in Hard Copy	As soon as the term ends and grades are posted

For more information on funding maximums for a one year technical diploma, Associate degree, Bachelor's degree, and graduate funding, please see the our policy at: www.ho-chunknation.com/highered.



STUDENT RIGHTS AND RESPONSIBILITIES

Student Responsibilities

As a participant in the Ho-Chunk Nation Scholarship Program:

1. I agree that participation in this program is strictly voluntary.
 2. I hereby acknowledge that I have read and fully understand the rules, terms, and conditions of the Higher Education Scholarship Program Policy and agree to abide by said rules, terms, and conditions. **The Higher Education Division Funding Policy is located at www.ho-chunk.com/highered.**
 3. I understand that my failure to comply with all such rules, terms and conditions, currently existing or as amended or modified, may result in probation or suspension from the Ho-Chunk Scholarship Program.
 4. As a scholarship recipient, I agree to be and shall be legally obligated to apply all scholarship funds (excluding living expenses) solely to the educational purpose(s) expressed in my academic plan.
 5. If I withdraw, drop out, or am expelled from any classes, or if I reduce the initial number of credits, or classes taken, I must provide written notification to the Higher Education Division immediately. Failure to do so may result in my probation or suspension with the Ho-Chunk Scholarship Program.
 6. If born after 1988, I understand that it is my responsibility to **report the value of my Per Capita Trust Fund** ("18 Money") when I complete my FAFSA, **and claim that amount as a financial asset when I file my annual income tax return.**
 7. I understand that the Ho-Chunk Nation assumes no responsibility and no liability for any effects that the Scholarship Program may have on any other funding anticipated or actually received by the participant, including but not limited to, Welfare, Social Security, Supplemental Security Income (SSI), Medicare, or other grants, scholarships and/or fellowships provided by any private, state, or federal entities currently existing or created in the future.
 8. I will communicate with education department staff respectfully and conduct myself in a courteous manner.
 9. I acknowledge that the funding process may take several months to complete, and that it is in my best interest to apply early. I understand that the Ho-Chunk Scholarship I am applying for cannot be processed until all supporting documents have been submitted by me.
 10. I acknowledge my responsibility for school fees and charges until financial aid eligibility is determined, awarded, and sent to the Financial Aid Office.
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Tax Consequences

1. I understand that any educational scholarship I receive from the Ho-Chunk Nation may result in tax consequences. The Internal Revenue Service (IRS) states that any money I receive is income, although educational scholarship income may qualify for an exception.
2. I hereby acknowledge the responsibility for substantiating any deduction of educational scholarship income rests with the individual taxpayer.
3. I also acknowledge that the Ho-Chunk Nation is not liable for any tax consequences which may result from the distribution of scholarship funds to me.
4. I understand my tax responsibility to claim all HCN Per Capita payments received annually.

NOTE: It is the student's responsibility to file a tax report annually.

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HO-CHUNK NATION SCHOLARSHIP APPLICATION

Complete in ink. Incomplete and/or illegible applications will be returned to the student.

439A00-

TRIBAL ID NUMBER LAST NAME FIRST NAME MI PREVIOUS/MAIDEN NAME

MALE FEMALE PHONE E-MAIL MAIL

SOCIAL SECURITY NUMBER DATE OF BIRTH (MM/DD/YY) GENDER PREFERRED COMMUNICATION

MAILING ADDRESS (WHILE ATTENDING SCHOOL) CITY STATE ZIP

CITY STATE ZIP

PRIMARY PHONE NUMBER PRINT EMAIL

FAFSA FILING DATE (MM/YY) COLLEGE/UNIVERSITY YOU WILL ATTEND COLLEGE/UNIVERSITY LOCATION: CITY/STATE

PREVIOUS HIGHERED FUNDING RECEIVED: YES NO YEARS: _____

MARITAL STATUS: _____ NUMBER OF DEPENDENTS: _____

FATHER'S NAME: _____ TRIBAL AFFILIATION: _____

MOTHER'S MAIDEN NAME: _____ TRIBAL AFFILIATION: _____

STUDENT CONSENT & RELEASE OF INFORMATION:

The information given by me on this form is accurate and complete to the best of my knowledge. I give permission for all information on this form to be shared among the BIA, the Ho-Chunk Nation, the State, and Financial Aid Office at my school. I have read and agree to the student rights and responsibilities on page two (2). **I acknowledge my responsibility for school fees and charges until financial aid eligibility is determined, awarded and sent to the Financial Aid Office.**

I further authorize the Ho-Chunk Nation Higher Education Division to release my personal information to the family member listed below as it pertains to my scholarship process:

To consent to the release of your students to a third party, please notify Higher Education via Email at: higher.education@ho-chunk.com

Signature of Applicant

Date

Incomplete and/or illegible applications will be returned to the student.

TO BE COMPLETED BY THE HO-CHUNK NATION TRIBAL ENROLLMENT OFFICER

The above named applicant is an enrolled Ho-Chunk Nation member, and is _____ degree Ho-Chunk blood according to available records 439A00_____

Enrollment # Member's Name on File Certifying Official Date

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STUDENT PROFILE

To better suit your educational needs, we want to know more about you. Please tell us about your education goals. Secondly, what are your career goals upon degree completion?

CURRENT YEAR IN SCHOOL/CREDITS EARNED FOR INTENDED DEGREE:

FRESHMAN 1-30 SOPHOMORE 31-60 JUNIOR 61-90 SENIOR 91-120 GRADUATE # CR. ____ NO CREDITS/UNSURE

CURRENT DEGREE:

TECHNICAL DIPLOMA/CERTIFICATE ASSOCIATE BACHELOR'S MASTER'S JURIS DOCTORATE DOCTORATE

CURRENT PROGRAM/MAJOR : _____ EXPECTED GRADUATION DATE: _____

U.S. VETERAN : NO YES, MILITARY BENEFITS: STATE FEDERAL MILITARY DISCOUNT PARENT/SPOUSE N/A

PRESENT EMPLOYMENT STATUS: EMPLOYED: YES NO WORK STATUS WHILE ATTENDING SCHOOL: FULL-TIME PART-TIME N/A

HO-CHUNK NATION EMPLOYEE: NO YES DEPARTMENT: _____

Student Signature

Student Name (printed)

Date

Office use only: ____/____/____ Sent: E/M/O ____/____/____ Initials _____