Academic Year 2024-2025



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 a progressive degree program at an accredited Title IV non-profit institution of higher learning (subject to approval);
- Properly file a Free Application for Federal Student Aid (FAFSA) each academic year;
- Complete the Ho-Chunk Scholarship Application (recommended **90 days** prior to start date) no later than **absolute deadline** first day of class; *
- Funding maximums are determined by degree type you are pursuing and prorated for part-time attendance. Funding is determined by standard semester terms, students pursuing coursework online, evening classes, or attending quarter based schools will be calculated into an equivalent semester ratio.

* Students are provided one opportunity (per degree level) to qualify for a scholarship after the deadline with a letter that explains the student's late application.

The following is needed to complete the funding process:	Timeline		
1. Ho-Chunk Scholarship Application (HSA) Complete one application each academic year	May 1 st or as soon as accepted and/or committed to a school after January 1 st		
Academic Year includes both fall and spring terms; Applications will not be processed after the absolute deadline (first day of classes)			
2. Complete a 2024-2025 Free Application for Federal Student Aid (FAFSA) - file/update annually	https://studentaid.gov/h/apply-for-aid/fafsa		
3. Acceptance Letter: Tech/two-year campus students Admission Letter: Four year and graduate students	As soon as possible		
4. Class schedule, including your name, academic term, school name, and number of credits	As soon as you register		
5. Itemized school billing statement , including your name, academic term, school name, and breakdown of expenses	As soon as it is posted to your student account		
6. Financial Aid Award Summary provided by the school (i.e., financial aid, scholarship, grants and loan offer)	As soon as it is posted to your student account		
7. Official transcript (only if previously funded)	As soon as grades are posted for term		
8. Copy of your Certificate Degree of Indian Blood (CDIB) Request from Tribal Enrollment Office	As soon as possible –required once, except for changes in legal name		

Funding of Last Resort Clause: Full-time students accepted into a four-year program, and determined by the school's Financial Aid Office as need-based, may require some original documents due to federal funding source.

For more information visit: https://ho-chunknation.com/government/executive-branch/education/ E-mail us at: higher.education@ho-chunk.com

P.O. Box 667, Black River Falls, WI 54615 • 1-800-362-4476 e-mail: higher.education@ho-chunk.com • Fax: 715-284-1760

Academic Year 2024-2025



Student Rights and Responsibilities

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

- 1. I agree that participation in this program is **strictly voluntary**; once an award is used, I acknowledge my requirement to abide by the minimum qualifications of the scholarship. I further understand violations may result in repayment of the award in full.
- 2. I hereby acknowledge that I have read and fully understand the rules, terms, and conditions of the Higher Education Division Operating Policy and agree to abide by said rules, terms, and conditions of the policy and scholarship award letter.
- 3. I understand that my failure to comply with all such rules, terms and conditions, currently existing or as amended or modified in the Higher Education Division Operating Policy, may result in probation, suspension and/or a financial obligation that is my responsibility.
- 4. I understand and agree 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 as funding may result in the return of scholarship funding to the Ho-Chunk Nation Higher Education Division. I further understand that failure to do so may result in my probation, suspension and/or a financial obligation that is my responsibility.
- 5. 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.
- 6. I acknowledge that the funding process may take several weeks 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.
- 7. I further acknowledge my financial responsibility for school fees and charges until awarded and sent to the school.
- 8. I understand and agree that funds may be returned due to changes in my enrollment status or failure to maintain Satisfactory Academic Progress (SAP).
- 9. I understand the difference between General Welfare Exclusion Payments (non-taxable) and Per-Capita payments (taxable income), as they relate to completing my Federal Aid Application properly. You may call HCN Department of Justice or HCN Treasury Departments for additional clarification.
- 10. When applicable, I understand that it is my responsibility to **report the value of my Per-Capita Trust Fund** when I complete my FAFSA.
- 11. I further understand if assets are not properly listed on the FAFSA, it will delay or make me ineligible for Ho-Chunk Scholarship until it is resolved.
- 12. I understand my tax filing responsibility to claim all required per-capita payment and/or trust I receive from the Ho-Chunk Nation on my taxes and list them properly on my FAFSA each year.

For policy information visit: https://ho-chunknation.com/government/executive-branch/education/

i.



Ho-Chunk Nation Scholarship Application

439A00-				
Tribal ID Number	Legal Last Name	First Name	MI	Previous/Maiden name/AKA
	/ /			🗅 Phone 🗖 E-mail 🗖 Mail
Social Security Number	Date of Birth (MM/DD/YY)	Preferred N	ame	Preferred Communication
Mailing Address (while attend	ling school) City	7	State	Zip
Permanent Address (if differen	t from mailing address) City	7	State	Zip
				□ Male □ Female □ Other
Primary Phone Number	Print E-M	Aail		Gender
/				
			/TT · · · T	
FAFSA Filing Date (MM/YY) College/University you will attend College/University Location: City/State				
				me Tax Filing? \Box Y \Box N
Marital StatusNumber of Dependents(General Welfare Exclusion Payments are not included, only per-capita payments)				
Previous Higher Education Division funding received D Y D N List Years:				
I have read and agree to the	terms within the Ho-Chunk N	ation Higher Education	Operation Poli	cy, Student Rights and
Responsibilities. I acknowl	ledge my responsibility for pay	ment of all school charg	es and fees unt	til my scholarship has been
determined, awarded, and sent to the school. I further acknowledge scholarship funds may be returned due to changes in				
enrollment status, additiona	l financial aid received or failu	are to maintain Satisfacto	ory Academic I	Progress (SAP). \Box Y \Box N
	Pare	ntal Information:		
Father's Name: Tribal Affiliation:				
Mother's Maiden Name:	other's Maiden Name: Tribal Affiliation:			
	Student Cons	ent & Release of Info	ormation:	

The information given by me on this form is accurate and complete to the best of my knowledge. By signing this application, I am granting permission for my post-secondary institution or prospective institution to share my information, including STUDENT FAFSA RECORD INFORMATION to the Ho-Chunk Nation Higher Education Division. I also give permission for my financial aid, billing, academic and degree information to be shared among the following agencies: Bureau of Indian Affairs, Ho-Chunk Nation Higher Education Division, State, Financial Aid Office, and Academic Advisors at my school. I understand I may be required to complete a separate release of information for any additional inquiries.

Student Signature	Student's Legal Name (printed)	Date		
Submitting an application in the recommended, 90 days prior to school start, timeline provides for the Higher Education Division staff to communicate with you and your school to finalize your scholarship. Applying on or near deadline only delays and possibly reduces available aid.				

Academic Year 2024-2025



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?

Describe the way in which you would be willing to contribute to the work of the Ho-Chunk Nation after you complete your degree program. It is our hope that our students will share their expertise with our people.

Number of Credits Earned in Intended Degree:				
□ Freshman 1-30	□ Sophomore 31-60	□ Junior 61-90	□ Senior 91-1	120 Graduate # credits
Current Degree Program:				
Technical Diploma/	Certificate 🛛 Associa	te 🗖 Bachelor's	□ Master's □	Juris /Doctorate
Program/Major :			Expected	Graduation Date:
Double Major/Minor:			Remainin	g Credits Needed to Graduate:
Other Benefits/Employment:				
U.S. Veteran: □ N □	Y Military Benefi	ts: 🗆 State 🗖 Fede	eral 🗖 Military D	iscount □ Parent/Spouse □ N/A
Present Employment: Employed: \Box N \Box Y Work Status While Attending School: \Box Full-time \Box Part-time \Box N/A				
Current Ho-Chunk Nation Employee: D N D Y Department: Division:				
I am interested in receiving information on the following:				
Academic Advisi	ing 🗖	Financial Advising	🗖 Disa	bility Services/Accommodations
Internship Opport	tunities 🛛	Study Abroad	🗖 Tuto	oring
□ Ho-Chunk Nation	n Employment 🛛	Mentorship Opportun	ities 🗖 Ho-	Chunk Nation Language

I understand that it is my responsibility to report changes regarding my contact information (legal name, address, phone, and email), enrollment status, and changes to my financial aid to the **Higher.education@ho-chunk.com** student e-mail. I further understand it is my responsibility to **provide a degree audit report each year**.

Student Signature	Student's Legal Name (printed)	Date	
For optimal processing, please send all electronic correspondence to the higher.education@ho-chunk.com student e-mail account			

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