

**Office of Navajo Nation  
Scholarship & Financial Assistance  
Part-Time Application**

Term(s) applying for:

20\_\_ Fall (due Aug. 31)

20\_\_ Winter/Spring (due Jan. 31)

20\_\_ Summer Only (due May 31)

Send Documents to Your Respective Agency Office:

- \_\_\_\_ ONNSFA Chinle Agency, PO Bo 25-B, Tsaile, AZ 86556
- \_\_\_\_ ONNSFA Crownpoint Agency, PO Box 1080, Crownpoint, NM 87313
- \_\_\_\_ ONNSFA Ft. Defiance Agency, PO Box 1870, Window Rock, AZ 86515
- \_\_\_\_ ONNSFA Shiprock Agency, PO Box 1349, Shiprock, NM 87420
- \_\_\_\_ ONNSFA Tuba City Agency, PO Box 370, Tuba City, AZ 86045

Toll Free #:

1-800-919-9269

1-866-254-9913

1-800-243-2956

1-866-223-6457

1-866-839-8151

Fax#:

928-724-2208

505-786-2178

928-871-6561

505-368-1338

928-283-3215

PLEASE PRINT LEGIBLY AND COMPLETE ALL APPROPRIATE INFORMATION

Date:		Applicant Name: (Last)		(First)	(Middle Initial)	(Maiden Name)
SSN:		Are you a Veteran? Yes <input type="checkbox"/> No <input type="checkbox"/>		Phone No.(s)		Wk:
		Handicapped/Disabled? Yes <input type="checkbox"/> No <input type="checkbox"/>		Hm:		
Mailing Address: if mailing address changes, please contact ONNSFA immediately & provide new address.						
City:		State:		Zip Code:	E-Mail Address:	
Census No.:		Date of Birth:		Marital Status:		Gender: (Check One) <input type="checkbox"/> Male <input type="checkbox"/> Female
No. of Dependent(s):		Parent/Guardian Name and Address:				
Navajo Chapter House Affiliation (REQUIRED INFORMATION):						
High School or G.E.D. Center: (Name & Location)					H.S. Diploma or GED received: Month / Year	
Type of High School You Graduated From: (Check One) <input type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> BIA <input type="checkbox"/> Tribal Contra <input type="checkbox"/> Secula <input type="checkbox"/> GE <input type="checkbox"/> Grant						
College or University You Will Attend: (Name, City, State, Zip)					Type of Term (Circle One) Semester <input type="checkbox"/> Quarter/Trimester <input type="checkbox"/>	
Type of Degree You Will Earn While Attending College: (Circle One)		Diploma or Certificate	Associates: A.A. / A.S / A.A.S.	Bachelors: B.A. / B.S.	Masters: M.A. / M.S.	Doctorate: Ed.D / M.D. / Ph.D. / J.D.
College Classification: (Check One) <input type="checkbox"/> Freshman <input type="checkbox"/> Sophomore <input type="checkbox"/> Junior <input type="checkbox"/> Senior <input type="checkbox"/> Graduat <input type="checkbox"/> Post-Graduate						
Undergraduate/Graduate: (REQUIRED INFORMATION) Major:					Anticipated Date of Graduation: Month / Year	
Graduates ONLY: (REQUIRED INFORMATION) Program or Department Accepted Into:					Anticipated Date of Graduation: Month / Year	
Have You Received a Navajo Nation Scholarship Before? (Check One) Yes <input type="checkbox"/> No <input type="checkbox"/>			If Yes, When and What Institution:			

**OFFICE USE ONLY**

Date	Status Code	Fund Code	Award	Fall	Winter	Spring	School	Term	Initial	Initial

Revised 07/16/03

**Read, Sign, & Date the Navajo Nation / Student Contract on the reverse side.**

**Required!**

Office of Navajo Nation Scholarship & Financial Assistance

**PART-TIME ONLY**

Terms & Conditions

**Student Agreement**

Applicant shall submit the following documents to determine eligibility:

1. A completed ONNSFA part-time application.
2. An official Certificate of Indian Blood (CIB) from respective agency.
3. A copy of the Letter of Acceptance into the degree program.
4. Official transcript from all colleges previously attended.
5. An up to date graduation or degree checklist signed by advisor.
6. A copy of official course registration/schedule for term applying for.

This agreement is entered into for the academic year. The student is entering into an agreement, by and between the Office of Navajo Nation Scholarship & Financial Assistance hereinafter referred to as ONNSFA, and student applicant, hereinafter referred to as "**Undergraduate or Graduate Recipient**".

I as the **Undergraduate Recipient**, agree to:

1. attend the institution as stated on the award letter and take the approved required course(s) as recipient of the program;
2. Enroll in courses leading towards specified degree;
3. take a minimum courseload of three (3) credit hours and maximum of nine (9) hours each term;
4. earn a "C" or better in each course funded;
5. be subjected to repayment if:
  - a) I receive a "D" grade or below in any course funded;
  - b) I withdraw from course(s) funded;
  - c) the course(s) funded is not applicable to my degree;
  - d) I take repeated course(s).
6. submit official grade report or transcript to ONNSFA no later than thirty (30) working days after the completion of the academic term for continued eligibility;
7. inform the ONNSFA of any changes in my academic status as a student in the institution.

I as the **Graduate Recipient**, agree to:

1. attend the institution as stated on the award letter and take the approved required course(s) as recipient of the program;
2. Enroll in course(s) leading towards specified degree;
3. take a minimum courseload of three (3) credit hours and maximum of six (6) credit hours each term;
4. earn a "B" or better (3.0 g.p.a.) in each course;
5. be subjected to repayment if:
  - a) I receive a "C" grade or below in any course funded;
  - b) I withdraw from course(s) funded;
  - c) the course(s) funded is not applicable to my degree;
  - d) I take repeated course(s).
6. submit official grade report or transcript to ONNSFA no later than thirty (30) working days after the completion of the academic term for continued eligibility;
7. inform the ONNSFA of any changes in my academic status as a student in the institution;

If and when this application is approved, I shall accept and abide by the terms and conditions above and will be bound by the responsibilities and consequences thereof and give permission to ONNSFA to receive my transcripts and financial information.

Student Signature: \_\_\_\_\_

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