



**BARONA BAND OF MISSION INDIANS
SCHOLARSHIP POLICY**
(Non-Barona Tribal Member)

Scholarships are available for sums up to \$5,000 to attend a college or university accredited by an entity recognized by the U.S. Dept. of Education. No vocational schools are included in this policy.

Procedures for application are as follows:

1. Cover letter
2. Complete attached application
3. Attach a copy of your most recent high school or college transcript
4. Attach a copy of your letter of acceptance from the institution for which you are applying
5. Attach a copy of documents from the institution indicating your financial need for tuition and/or books and supplies
6. Submit all items to the Education Committee at the Barona Tribal Office

Terms and conditions

- Student must have a high school or college cumulative grade point average (GPA) of 3.0 or higher and must be carrying a class load of 12 units or more to qualify.
- Funds may be used towards required equipment such as calculators, computers, etc., if the equipment is determined to be necessary for the class. Necessity is determined by course description and a statement signed by an authorized representative of the college or university.
- Grade reports must be submitted within ten (10) days of receipt to remain eligible for scholarship funds.
- Funds are not available for on-line classes or correspondence schools.
- Priority will be given to members of San Diego County Indian Tribes.

Note: If application is not complete you may not be considered for a scholarship.

If your scholarship application is approved, funds will be sent directly to the school (financial aid) you will be attending. Due to the increasing number of requests for scholarships, amounts may vary up to \$5,000. Incomplete terms will disqualify you from any further assistance.



**BARONA BAND OF MISSION INDIANS
SCHOLARSHIP APPLICATION**
(Non-Barona Tribal Member)

Date: _____

Student ID# _____

Applicant's name: _____

Phone: _____

Address: _____

E-mail: _____

Address while attending school (if different from above):

Are you a member of a Federally Recognized Indian Tribe: Yes _____ No _____

Tribal Affiliation _____

Enrollment No: _____

(Attach proof of enrollment)

Educational institution for which you are requesting assistance:

Name: _____

Address: _____

Registrar phone #: _____

E-mail contact: _____

If approved:

Check payable to: _____

Address scholarship is to be sent to (if different from above):

Address: _____

Term for which you are applying: _____

No. of units: _____

Type of degree or certificate you are applying for (i.e. A.A., B.A., etc.):

Additional Information (if any):

In submitting this application, I certify that the information provided is complete and accurate to the best of my knowledge. Falsification of information may result in the revoking of any scholarship granted.

_____ | Applicants signature

| Date

Council delegate approval signature:	Date
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