Suquamish Higher Education Grant Award Application

Term(s) applying for:

20 _____ Fall/Academic Year
Applications due July 1 for whole academic year

20 _____ Winter/Spring/Summer
Winter Quarter/Spring Semester applications due by December 1
Spring applications due by February 1 Summer applications due by May 1

DEADLINES ARE FIRM

Date:	Applicant Name:	(Last)	(First)	(Middle)

Student ID #:	Tribal ID #:	Date of Birth:	Phone #(s) Home: Mobile:	

Mailing Address:	New Student: ☐ Yes ☐ No
	Returning Student: ☐ Yes ☐ No

City:	State:	Zip Code:	Email Address:

High School or G.E.D. Center: (*Name & Location*)	Month & Year H.S. Diploma or G.E.D. received:

College or University You Will Attend (*Name, City, State, Zip*)	Type of Term: (*Check one*) ☐ Semester ☐ Quarter ☐ Trimester
(*Continued*)	Online Institution: (*Check One*) ☐ Yes ☐ No

Type of Degree you will earn while Attending College: (Check one)	Certificate:	Associates: ☐ A.A/AS	Bachelors: ☐ BA/BS	Masters: ☐ MA/MS	Doctorate: ☐ EdD/MD/PhD/JD

College Classification: (*Check One*) ☐ Freshman ☐ Sophomore ☐ Junior ☐ Senior ☐ Graduate ☐ Post-Graduate

Certificate / Undergrad. Major:	Anticipated Month & Year of Completion/Graduation:

Graduate Students ONLY: Program or Department Accepted Info:	Anticipated Month & Year of Graduation:

My Enrollment Status Will be: (*Check One*)

☐ Part-Time Less than 12 credits	☐ Undergraduate Full-Time 12 Credit hours or more	☐ Graduate Part-time Less than 9 credit hours	☐ Graduate Full-Time 9 Credit hours or more

Office Use Only

Date Received	Status Code	Term Award	Award Amount	Fall Credits	Fall Grades	Winter Credits	Winter Grades	Spring Credits	Spring Grades	Check Mailed	Initial	Initial