

EDUCATION ASSISTANCE APPLICATION XAADAA'S KIL_KWIAAYS FOUNDATION

Xaadaas Kil_Kwiaays Foundation Education Assistance funds are granted to meet students' higher education financial needs after personal funds and other resources are exhausted. Students may receive up to a maximum of \$500 (Five Hundred dollars) during each calendar year.

To be eligible, you must...

- Be a Haida Corporation Shareholder or descendant
- Have a high school diploma or GED certificate
- Be accepted by or attending an accredited college or university.
- Be enrolled in a minimum of twelve[12] semester hours
- Be in good academic standing with accredited institution
- Submit documents to verify you meet the above requirements

STUDENTS MUST APPLY FOR FUNDING FROM OTHER SOURCES BEFORE APPLYING FOR EDUCATIONAL ASSISTANCE FROM Xaadaa's Kil_Kwiaays FOUNDATION.

All pages of this application must be completed and submitted with the required supporting documents to the Haida Corporation Offices on, or before, the corresponding deadlines listed below. If mailed, it must be postmarked on or before the deadline. Late or incomplete applications will not be reviewed.

Application Deadlines: January 23, 2008

ANNUAL AWARD DATE: February 1, 2008

Xaadaas Kil_Kwiaays Foundation
P.O. Box 89
Hydaburg, Alaska 99922
Phone (907) 285-3442
FAX (907) 285-3944
Email: @haidacorporation.com

STUDENT'S FINANCIAL NEEDS ASSESSMENT

Currently Attending School? No _____ Yes _____ Year: _____

School attending is: _____

For what quarter/semester are you applying for funding?

Fall: _____ Semester-based: _____ Winter Spring: _____

Quarter-based: _____ Summer: _____

School Expenses (provide costs for FULL school year)

Tuition: \$ _____ Fees: \$ _____

Books & Supplies: \$ _____ Housing/Utilities (on campus housing): \$ _____

Meals: \$ _____ Transportation: \$ _____

Tutor: \$ _____ Other (Identify): \$ _____

Total School Expenses: \$ _____

Living Expenses (costs for FULL school year)

Housing (off-campus): \$ _____ Utilities: \$ _____

Food: \$ _____ Transportation: \$ _____

Other (Identify): \$ _____ Total Living Expenses: \$ _____

TOTAL SCHOOL AND LIVING EXPENSES: \$ _____

Applicant's Name: _____

**STUDENT INCOME & OTHER RESOURCES AVAILABLE
FOR SCHOOL AND LIVING EXPENSES**

YOUR INCOME OR FAMILY CONTRIBUTION

From Wages or Gifts: \$ _____ Parents or Guardian Contribution: \$ _____

Other (child support, PFD, etc.): \$ _____ Total INCOME Available: \$ _____

SCHOLARSHIPS, GRANTS, OR LOANS

Attach copies of letters awarding or denying funding from all other programs or sources.

Hydaburg Cooperative Association (or other tribal entity): \$ _____

Tlingit & Haida Central Council: \$ _____

Sealaska Heritage Institute: \$ _____

Haida Corporation: \$ _____

Native Corporation: \$ _____

Local ANB/ANS or Grand Camp Scholarship: \$ _____

Pell Grant: \$ _____

Alaska Student Loan: \$ _____

Other: \$ _____

Total Scholarships/Grants/Loans: \$ _____

TOTAL RESOURCES (Income + Scholarships/Grants/Loans): \$ _____

To determine your financial needs, subtract your Total Resources from your School & Living Expenses.

TOTAL SCHOOL AND LIVING EXPENSES (from previous page): \$ _____

TOTAL RESOURCES (from above): \$ _____ AMOUNT NEEDED: \$ _____

Applicant's Name: _____

ASSESSMENT BY SCHOOL'S FINANCIAL AID OFFICER

Student: Complete Pages 2 & 3 of this application and provide copies of them with this page to the school's FAO for assessment and signature. The student is responsible for submitting this completed page to XKKF as part of the completed application.

Financial Aid Officer (FAO): Please evaluate the student's expenses and resources provided on pages 2 & 3 of this application.

FAO Name Email: _____

Name of College/University: _____

Address City State Zip: _____

Telephone Fax: _____

ARE THE STUDENT'S PROJECTED EXPENSES ACCURATE/REALISTIC?

Tuition Comments: _____

Books: _____

Housing: _____

Fees: _____

HAS STUDENT IDENTIFIED ALL FINANCIAL RESOURCES?

Grants Comments: _____

Loans: _____

Other: _____

IS FINANCIAL ASSISTANCE AVAILABLE TO THIS STUDENT THROUGH YOUR OFFICE? Yes _____ No _____

HAS THIS STUDENT BEEN ADVISED OF AVAILABLE FUNDING OPPORTUNITIES? Yes _____ No _____ Results:

FAO Signature Date:

Applicant's Name: _____

STUDENT'S FINANCIAL NEEDS ASSESSMENT NARRATIVE

EXPLAIN YOUR FINANCIAL NEEDS: (Provide any information you feel necessary to help Xaadaa's Kil_Kwiaays Foundation evaluate your application.)

WHAT ARE YOUR PLANS, ONCE YOU HAVE COMPLETED YOUR EDUCATION?

I certify that, to the best of my knowledge, all information provided in this application is true.

Applicant Signature Date: _____

Applicant's Name: _____

STUDENT'S WAIVER FOR RELEASE OF INFORMATION

I, the undersigned student, hereby authorize Xaadaa's Kil_Kwiaays Foundation to request and obtain information from the university, college, or vocational school I am attending concerning my academic achievement. This may include, but is not limited to obtaining copies of my transcripts, talking with professors, counselors, and administrative personnel, to provide information regarding my educational assistance application.

Applicant Signature Date: _____

Notice to Applicant:

The decision to award an education assistance grant rests solely with the Board of Trustees of the Xaadaa's Kil_Kwiaays Foundation; the Board's decisions are final. Filing an application for educational assistance does not constitute a contract with Xaadaa's Kil_Kwiaays Foundation, Inc., nor is HKKF under any contractual requirement to award educational assistance funds to applicants.

Applicant's Name: _____

Xaadaa's Kil_Kwiaays Foundation Application Requirements

Use the checklist below to make sure all required items are completed and/or attached before delivering the application to Xaadaa's Kil_Kwiaays Foundation.

1. All sections of Xaadaa's Kil_Kwiaays Foundation application are completed.
2. High School transcripts or GED Certificate attached; letters of recommendation from school administrators are provided.
3. Letter or written notification of acceptance from the college or university is attached.
4. If you are currently attending college or university, a recent transcript and current schedule of classes must be attached.
5. Your school's Financial Aid Office must complete and sign the Financial Aid Officer Assessment (if already in college).
6. Scholarship applications filed with other agencies; letters/notices of your scholarship awards/denials from other agencies are attached to this application.
7. Waiver/release of information statement is signed and dated.

All pages of this application must be completely filled out and delivered with the required support documents to Xaadaa's Kil_Kwiaays Foundation on or before deadlines listed below.

Applications sent in the mail must be postmarked no later than the deadline for which you want it considered. Late or incomplete applications will not be reviewed.

Application Deadlines:

Annual (Once A Year Award)

January 23, 2008: Complete Application RECEIVED

February 1, 2008: Award Date

Mail Application To: Xaadaa's Kil_Kwiaays Foundation

P.O. Box 89 Hydaburg, Alaska 99922

FAX Application To: (907) 285-3944

Note: if faxing your application, the original application must also be mailed to the Xaadaa's Kil_Kwiaays Foundation. For Information Call: (907) 285-3721

Applicant's Name: _____

COMMITTEE RECOMMENDATION:

DATE:

AWARD:

COMMENTS: