

**TOOH HALTSOOI COUNCIL OF NAATAANII CHAPTER
P.O. BOX I, SHEEP SPRINGS, NM 87364**

Effective 2016

NO: 2018-017

Chapter Student Scholarship and Financial Assistance Application	Term Applying for: 20__ Spring Semester 20__ Sumr 20__ Fall Semester
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Date: _____

PERSONAL INFORMATION

Social Security Number	Census Number	Legal Name: (Last Name, First Name, Middle Initial)		
Current Mailing Address: City/State/Zip Code				Telephone Number:
Permanent Home Address: City/State/Zip Code				Telephone Number:
Date of Birth	Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male	Marital Status:		Number of Children:
Are you a Veteran <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you a registered voter of Tooh Haltsooi Council of Naataanii Chapter? Must provide proof of voter registration. <input type="checkbox"/> Yes <input type="checkbox"/> No			
Mother's Name:	Address: City/State/Zip		Tribe:	
Father's Name:	Address: City/State/Zip		Tribe:	

EDUCATIONAL INFORMATION

High School: Name/City/State	Month & Year of Graduation or GED received
College Classification <input type="checkbox"/> Freshman <input type="checkbox"/> Sophomore <input type="checkbox"/> Junior <input type="checkbox"/> Senior <input type="checkbox"/> Graduate <input type="checkbox"/> Post-Graduate	College, University, or School you plan to attend: Name/City/State
	Major: _____ Type of Degree Seeking: _____
	Letter of Acceptance? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Name of College or University Last Attended _____ Month & Year _____
Have you received a Navajo Nation Scholarship? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when? _____	Have you received a Chapter Scholarship before? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when? _____
Institution: _____	

CERTIFICATION

I certify that the information provided is correct to the best of my knowledge. I understand that if any information is found fraudulent, any further request for assistance will be denied. I give my permission to Tooh Haltsooi Council of Naataanii Chapter to receive transcripts and financial information.

Student Signature

Date

