



315 Lincoln St., Suite 300
Sitka, Alaska 99835
(907) 747-3534
(907) 747-5727 Fax
1-800-478-3534 Shareholder Line
www.sheatika.com

Dear Shareholder: **This is the latest version of our scholarship application - REVISED JANUARY, 2012**

Attached is a Shee Atiká Benefits Trust (SABT) Scholarship application. Please **thoroughly** read the instructions before completing the application. The SABT Committee does not have access to your entire file and only reviews the information submitted with this application.

The following application deadlines are open for consideration of full or part time students, vocational/technical training (regular & condensed), cultural & heritage study, career development, etc.:

March 2, 2012
June 1, 2012
October 5, 2012

Emailing (scholarships@sheatika.com) your PDF application and attachments is the recommended method of submitting your application. **NO FAXING your application.** *No exceptions will be made for late applications.* Applications must be received by the close of business on the due dates listed above. We have three application deadlines per year. If you need funding for the entire academic year, please indicate all term dates on page 5 indicating the exact number of credits for each term as our awards are per credit.

If you are applying for training with a Vocational/Technical School, Concentrated Vocational School or Short Term Training (i.e. career development), include additional information with your application such as a copy of the booklet or pamphlet explaining the school you will be attending, cost of training, hours/timeframe to complete training and your course of study.

Your current SABT Scholarship Committee consists of shareholders and is a separate committee from your Board of Trustees. Your current scholarship committee is:

	<u>Evening</u>	<u>Email</u>
Laverne Wise, Chairman – Kent, WA	(253) 217-9972	lavernew@sihb.org
Nancy Douglas – Sitka, AK	(907) 747-8380	douglasn81@gmail.com
Suzanne Armstrong – Anchorage, AK	(907) 349-6463	suzan5@alaska.com
Kristina Randolph – Juneau, AK	(907) 957-1094	krisbart@searhc.org

If you have any questions, please contact me.

For the SABT Scholarship Committee,

A handwritten signature in black ink that reads "Lillian J. Young".

Lillian J. Young
Shareholder Services Manager
SABT Scholarship Program Administrator

SHEE ATIKÁ BENEFITS TRUST (SABT) SCHOLARSHIP APPLICATION

Sponsored by the Shee Atiká Benefits Trust (SABT)

315 Lincoln St., Suite 300

Sitka, Alaska 99835

ADMINISTRATION

The Board of Trustees of the Shee Atiká Benefits Trust (SABT) has set aside funds to provide educational grants to eligible Shareholders. These funds are administered by a Committee of Shareholders, which is independent from the Shee Atiká Board of Trustees. This Committee is called the Shee Atiká Benefits Trust Scholarship Committee. All decisions made by the Scholarship Committee regarding scholarships are final.

PURPOSE

The Scholarship Program has been designed to help Shareholders meet his or her educational goals. This may be by attendance at college, graduate school, trade or vocational school, seminar or any other accredited training institution or school reasonably designed to help a Shareholder into the work force or to advance a career. The emphasis will be on job preparation or job enhancement. Please note that we have a separate application for cultural & heritage study.

ELIGIBILITY

You must be a *Shee Atiká, Incorporated* Shareholder. If you are not a shareholder, but are a family member of a shareholder, you will need to receive a *gift of at least one share* of Shee Atiká stock from a family member allowed to make a gift under the Alaska Native Claims Settlement Act (ANCSA).

You must have a high school diploma or GED to be considered for a SABT academic scholarship award. While need and academic background may be taken into consideration, other factors may be more important in the committee's evaluation, such as your personal goals and your commitment to succeed. Please be advised that if your current GPA is less than 2.0 you may be placed on academic probation.

DISBURSEMENT OF FUNDS

Funds will only be distributed to the school on behalf of a scholarship recipient. This scholarship must be used for tuition, fees, books and supplies. Once these items have been paid in full, then any remaining funds can be released to both on and off campus students for room and board. Undergraduate students will receive \$100 per semester hour at a semester-system school or \$66.67 per quarter hour at a quarter-system school. The maximum award per academic year (August 1 through July 31) for undergraduates is \$2,400.

Graduate level awards will be apportioned based on the customary practice at the institution for that discipline. The maximum award per academic year for graduate school (including law, veterinary and medical schools) is \$4,800. The Committee may set the award based on other criteria for programs that do not fall strictly within a quarter or semester system. In those cases, students should provide documentation regarding what is considered "full time" enrollment for their particular school.

Students taking fewer credits than indicated will have their next award amount reduced by the amount of credits not taken.

Concentrated Vocational Training: The Committee may award up to three times the annual undergraduate amount to help fund concentrated vocational training. When awarded a multiple of the annual amount, a signed waiver must be provided with the application acknowledging that the applicant will not be eligible for additional funding for a period of time commensurate with the amount awarded. For example, if the Committee awarded twice the annual amount this year, the recipient would not be eligible to receive funding for 2 academic years. *If you are applying for a concentrated vocational/technical scholarship, you need to request a Waiver form separately from this application.*

Career Enhancement: This scholarship must be used for tuition, fees, books and supplies. Travel for job/career enhancement is permitted so long as the travel is essential and the course work could not otherwise be pursued at a closer location or by distance delivery. The committee will ensure that students applying for such training certify to necessity of the travel involved. Travel to courses given at resort locations will be particularly scrutinized to ensure legitimacy. Job or career enhancement shall not include courses required to maintain professional licensure.

College Preparatory: Applicants must have completed their high school sophomore year with a cumulative GPA of 2.5 or better on a 4-point scale to qualify. The maximum award is \$750 and will be awarded on a one-time basis.

Lifetime Maximum – A student may not receive more than the equivalent of four years of undergraduate scholarships and three years of graduate scholarships in his or her lifetime. All SABB scholarship awards will apply against the shareholder's lifetime maximum. This amount is currently \$28,800. The Shee Atiká Benefits Trust Board of Trustees may increase the yearly maximum amounts for undergraduate and graduate study from time to time and said increases will serve to increase the lifetime maximum.

RECIPIENT'S RESPONSIBILITY

SABB recipients are responsible for informing the Shee Atiká Benefits Trust Scholarship Committee regarding their progress. This includes immediately advising the committee of any changes in status (i.e., drop school or a course) and mailing transcripts each quarter/semester or a current vocational progress report at the end of each academic period. Recipients must keep their mailing address and phone number current for their file at all times. Applicants are expected to have other resources and understand that scholarships from the SABB Scholarship Program will serve to supplement those resources.

OFFICIAL DOCUMENTS

The following documents must accompany your completed scholarship application:

- Most recent transcript, whether it is from high school or college (with the exception of career development courses, then you need not submit one). If you received a GED, then you must submit a copy of your certificate.
- Applications requesting a scholarship for vocational/technical programs, concentrated vocational, career development or college preparatory programs must include a copy of the program description or course of study (copy of booklet or pamphlet) explaining the school, training course(s), cost of training and hours/timeframe to complete your training.

CHANGING SCHOOLS

If you are awarded a Shee Atiká scholarship and decide to change schools, please notify Lillian at the Shee Atiká office as soon as possible.

If you change schools and your *major/degree or course intentions remain the same*, you need only resubmit the following:

- A cover letter including your name and address and an explanation for changing schools.
- Page 5 of the scholarship application.
- A copy of your new acceptance letter.

If you change schools and your *major/degree or course intentions also change*, then you need to reapply before the next application deadline.

ACADEMIC PROBATION

Students whose current (not cumulative) GPA falls below 2.0 may still be awarded an academic probation scholarship. Students who are placed on academic probation will not be eligible for further funding until a transcript is submitted verifying their current (not cumulative) GPA of at least 2.0.

TAXABILITY OF SCHOLARSHIPS

IRS regulations for the Trust require that we report scholarships paid as taxable income to the recipient on a Form 1099-DIV. You may receive a 1099-DIV in late January of the following year for amounts paid during the previous calendar year.

The IRS may provide tax credit programs that can reduce or eliminate any tax liability caused by the receipt of scholarships from the Shee Atiká Benefits Trust. Please consult the IRS or your tax advisor for details and applicability to your situation.

SHEE ATIKÁ BENEFITS TRUST (SABT)
Scholarship Application

GENERAL INFORMATION *(Make sure you complete entire application. Incomplete applications will not be considered. Write N/A in the blank if the question is not applicable.)*

Are you a Shee Atiká shareholder? ___ yes ___ no (All gift paperwork must be complete upon applying)

Last Name	First	Middle
Name as it appears on your Shareholder record (if different than above)		
Date of Birth		

PERMANENT Mailing Address			TEMPORARY Address in School		
Street Address	or	P.O. Box	Street Address	or	P.O. Box
City	State	Zip	City	State	Zip
Area Code	Phone # /	Cell Phone #	Area Code	Phone # /	Cell Phone #
Email Address (<u>Very Important</u>)					

EDUCATION List schools attended starting with most recent (i.e. college then high school)
 All applicants must submit their most recent transcripts.

Name of School	Date & Year Last Attended	*Graduate? (Yes/No/ <u>C</u> urrently <u>A</u> ttending)

*If you didn't graduate, state reason: _____

High School G.P.A. _____ (do not indicate "see transcript") Current College G.P.A. _____ (not cumulative)

PERSONAL GOAL STATEMENT [**EXPLAIN & ATTACH SEPARATELY**]

*Applicable **only** to first time applicants, if you change schools/degree program or have not applied in a while*

Examples to include in your statement: 1) Personal and professional goals 2) Activities, including any honors and 3) How this Shee Atiká Benefits Trust Scholarship will assist you. Please include more than 2 sentences.

FOR OFFICE USE ONLY:

Date of last award: _____ Amount: \$ _____

SCHOOL INFORMATION

Name of College/University/School (do not abbreviate)	Financial Aid Address		
Financial Aid Officer/Counselor	City	State	Zip
FAO Phone #	FAO Fax #		
Website Address	Email Address		

Is this an accredited School recognized by the U.S. Department of Education? Yes * No

* If you answer No, you must provide the school's accreditation/certification information.

Current Major, Minor, Degree Program or Course of Study: _____

AA AS BA BS MA PhD Vocational/Technical Concentrated Vocational

Expected graduation or program completion date: _____

YOUR CLASS STANDING/TYPE OF TRAINING for the upcoming academic year (Mark **ONE** applicable box)

Undergraduate: Freshman Sophomore Junior Senior

Graduate/Masters (completed 4 years undergraduate): 1st year 2nd year 3rd year 4th year

Career Development Vocational/Technical Concentrated Vocational Training College Preparatory

TYPE OF TERM (Mark one box)

Quarter Semester Trimester Other (indicate): _____

LIST ALL DATES APPLYING FOR ACADEMIC YEAR & EXACT NUMBER OF CREDITS PER TERM

Our academic year is August 1 through July 31. You may apply for funding for the entire academic year.

TERM	START DATES (mm/dd/yyyy) <i>double check year</i>	Exact Number of credits per term or Voc/Tech hours
Fall		
Winter		
Spring		
Summer		

Number of credits per term required by the school you are attending to be considered full time: _____

BUDGET FORECAST:

	Per Term	Per Year
Tuition and Fees	\$	\$
Books and Supplies	\$	\$
Room and Board	\$	\$
Other:	\$	\$
TOTAL	\$	\$

Your request MUST NOT EXCEED:

- \$750 *College Preparatory Program (if a high school junior or senior preparing for college)*
- \$815 *Maximum allowed for Career Enhancement*
- \$2,400 *Maximum allowed for scholarship amount for undergraduate or regular vocational/technical*
- \$4,800 *Maximum allowed for Graduate/Masters Degree (completed 4 years of undergraduate)*
- \$4,800 to \$7,200 *Concentrated Vocational training (must request & submit a Waiver from our office)*

Amount requesting from the SABB Scholarship Program \$ _____ (list one amount)

My signature below certifies that to the best of my knowledge the information given is true and correct. I authorize the Shee Atiká Benefits Trust to release this information as may be necessary to any other agency providing financial aid. This also authorizes release of academic & financial aid award/announcements for the Shee Atiká newsletters. **I acknowledge that the information submitted in this application may be subject to verification by the Shee Atiká Benefits Trust Scholarship Committee and the Shee Atiká, Incorporated Staff.**

Signature

Date

Print or Type Name of Applicant

STUDENT CHECKLIST: (Mark the boxes on the left to confirm completeness of your application)

Student

Staff

- | | | |
|--------------------------|---|--------------------------|
| <input type="checkbox"/> | Application Complete? (Double check - ALL blanks complete? Application typed or printed legibly?) | <input type="checkbox"/> |
| <input type="checkbox"/> | Personal Goal Statement attached? (<i>Applicable to: First time applicants; If changing schools or degree programs; or if you have not applied to our program in a while</i>) | <input type="checkbox"/> |
| <input type="checkbox"/> | Budget Forecast complete? (both columns for per term and per year) | <input type="checkbox"/> |
| <input type="checkbox"/> | Current transcript attached (most recent grades)? (Your transcript must be received at the Shee Atiká office by the of business on the application deadline date.) | <input type="checkbox"/> |
| <input type="checkbox"/> | Acceptance letter or Proof of Enrollment attached?
(Required for first time applicants, first time graduate applicants or if you change schools) | <input type="checkbox"/> |
| <input type="checkbox"/> | W-9 form attached? (Required with each application. This scholarship may be taxable to you.) | <input type="checkbox"/> |
| <input type="checkbox"/> | Permission to Release Information (Required with all applications.) | <input type="checkbox"/> |
| <input type="checkbox"/> | Signed Waiver attached? (Applicable only to students applying for a concentrated vocational scholarship, otherwise indicate N/A. This form needs to be requested from the office separately.) | <input type="checkbox"/> |
| <input type="checkbox"/> | Vocational Program Information (description of school/training, hours & cost) attached? | <input type="checkbox"/> |

APPLICATION DEADLINES

- March 2, 2012**
- June 1, 2012**
- October 5, 2012**

INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED. LATE APPLICATIONS WILL BE HELD FOR CONSIDERATION FOR THE NEXT APPLICATION DEADLINE.

PERMISSION TO RELEASE INFORMATION

I, _____, request that the following college/school release academic and financial aid information, as required, for as long as required or until revoked in writing by me from their files and records to the Shee Atiká Benefits Trust (SABT) Scholarship Committee, 315 Lincoln Street, Suite 300, Sitka, Alaska 99835.

Name of school: _____
(Same college/school listed on Page 5)

Address: _____

Signed this _____ day of _____, 20_____.

Student Signature

Printed Name of Student

Date of Birth