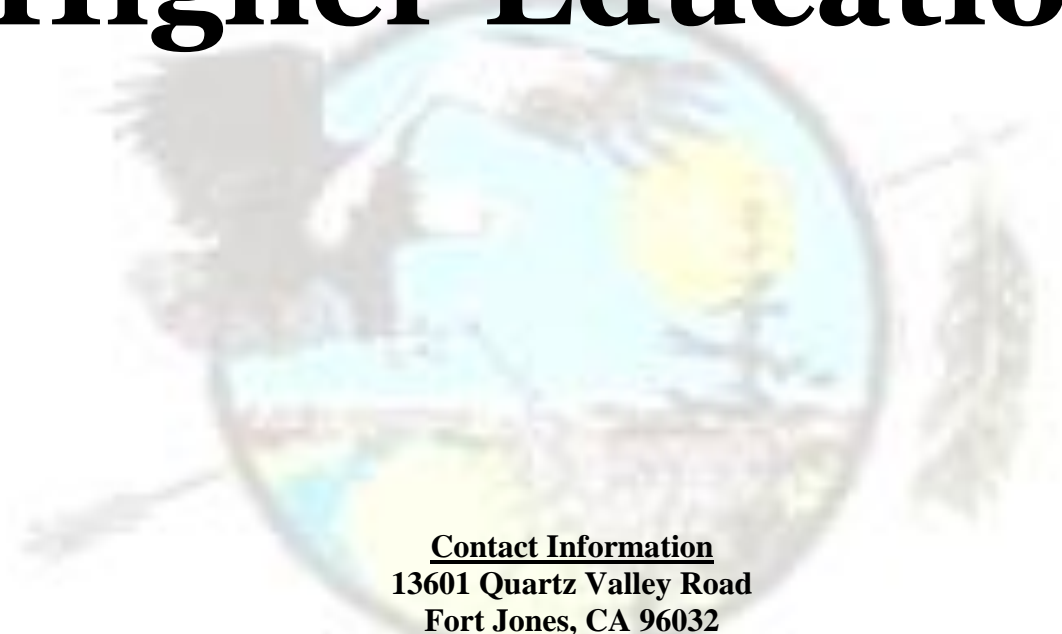


# **QVIR Higher Education**



**Contact Information**

**13601 Quartz Valley Road**

**Fort Jones, CA 96032**

**(530) 468-5907 ph**

**(530) 468-5908 fax**

**Frieda Bennett-Education Director**

**[frieda.bennett@qvir-nsn.gov](mailto:frieda.bennett@qvir-nsn.gov)**

**Quartz Valley Indian Reservation  
Higher Education Application**

The Quartz Valley Indian Reservation is requesting the following list of documents, to complete your file. If any or all of the documents are not submitted, it may postpone your application process. Please allow at least (6) six weeks for the processing of your application. NOTE: The processing period will start, when the QVIR Education Department receives all your information needed.

**The following documents are needed to complete the QVIR Higher Education Grant Application:**

1. **QVIR Higher Education Application**
2. **Tribal Enrollment Membership Certification or Verification**
3. **Letter of Acceptance/Re-Admission from College**
4. **Official High School Transcripts or GED**
5. **Current College Transcripts**
6. **Attach copies of all transcripts or certifications beyond High School level**
7. **Financial Needs Analysis**

**Semester Term:** \_\_\_\_\_ **Year:** \_\_\_\_\_

Our funds are awarded to the participant(s) who have fulfilled all the requirements. By completing an application, it does not guarantee you will receive funding/services. Financial Assistance will be determined on financial need and the funding available, at the time of the request.

**HIGHER EDUCATION:** The purpose of the Higher Education Program is to assist in Native American's acquiring a higher/advanced education necessary for a degree (AA, BA, etc.)

**ELIGIBILITY LIST:**

- 1. Applicants must be an adult Native American residing on or near a reservation, or reside in the service area.**
- 2. Applicants must have Tribal enrollment membership certification or verification of a federally recognized tribe**
- 3. Applicants must be accepted to an accredited institution/facility of higher education.**
- 4. Applicants must have a high school diploma or GED**

**\*\*\*ALL SIGNATURE PORTIONS OF THIS APPLICATION MUST BE SIGNED.  
FAILURE TO DO SO MAY DELAY THE APPLICATION PROCESS\*\*\***

**EXCEPTION:** If you do not understand the conditions or the information being requested, please contact the QVIR Education Department. The QVIR Education Department will answer all questions to the best of their knowledge.

**Note:** After all the questions are answered, the application will be sent back to you, for your signature.

**Personal Information**

(PRINT CLEARLY)

NAME: \_\_\_\_\_  
LAST FIRST M/I MAIDEN/ALIAS

MAILING ADDRESS: \_\_\_\_\_  
HOUSE #/BOX ST NAME CITY STATE ZIP CODE

EMAIL ADDRESS: \_\_\_\_\_

TELEPHONE: (\_\_\_\_) \_\_\_\_-\_\_\_\_ MESSAGE: (\_\_\_\_) \_\_\_\_-\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ SSN: \_\_\_\_\_-\_\_\_\_-\_\_\_\_

MARITAL STATUS:  
SINGLE:  MARRIED:  WIDOW:  DIVORCED:  SEPERATED:

DEPENDENTS: \_\_\_\_\_ NUMBER OF CHILDREN IN SCHOOL: \_\_\_\_\_

ARE YOU A VETEREN: YES:  NO:

ARE YOU A TRIBAL MEMBER? YES:  No:  APPLICATION PENDING:

TRIBAL ENROLLMENT NUMBER: \_\_\_\_\_

IN CASE OF EMERGENCY CONTACT

NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

TELEPHONE NUMBER (\_\_\_\_) \_\_\_\_-\_\_\_\_

## Education Information

Do you have a High School Diploma or GED? Yes:  No:

Highest Grade Completed: \_\_\_\_\_

College Request: Initial:  Repeat:

School Attended & Date(s):

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**COLLEGE:**

Are you a transfer student? Yes:  No:

Are you a Returning student? Yes:  No:

IF YES

Name of College: \_\_\_\_\_

Address: \_\_\_\_\_

Course Of Study: \_\_\_\_\_

Do you have income from any source? Yes:  No:

If yes please explain?  
 \_\_\_\_\_  
 \_\_\_\_\_

**EMPLOYMENT HISTORY: LIST LAST THREE EMPLOYERS STARTING WITH THE MOST RECENT**

DATE	NAME, ADDRESS AND TELEPHONE NUMBER	SALARY/WAGE	TITLE	REASON FOR LEAVING

**BY SIGNING THIS DOCUMENT I AM CERTIFIED THAT ALL INFORMATION PROVIDED ORALLY AND OR ON THE APPLICATION IS TRUE TO THE BEST OF MY KNOWLEDGE. I AM AWARE THAT SUCH INFORMATION IS SUBJECT TO VERIFICATION AND THAT FALSIFICATION OF THIS INFORMATION SHALL BE GROUNDS FOR MY TERMINATION FROM ANY PROGRAM IN THAT I AM PARTICIPATING.**

\_\_\_\_\_  
APPLICANT'S SIGNATURE

\_\_\_\_\_  
DATE

I hereby agree to attend the school indicated on this application. I must and will follow all rules, regulation, and attendance requirements of the school, to the best of my ability. I will satisfactorily complete the course on which I have selected.

I agree the funds/financial assistance issued to me for educational purpose be the Quartz valley Indian Reservation (QVIR) will be used for the educational facility and other educational associated cost

I also agree if the funds/financial assistance are not being used for the purpose intended, I must repay these funds to the Quartz Valley Indian Reservation.

I understand I must apply for other funds/financial assistance such as Pell Grant, etc.

I understand I cannot receive duplicated services from two different tribal agencies.

I received and acknowledge the Higher Education Policy.

**I AGREE AND UNDERSTAND ALL THE ABOVE CONDITIONS.** \_\_\_\_\_ (Initial)

**Privacy Act and Paperwork Reduction Act Statement**

1. Disclosure of the requested information by the applicant is voluntary, but required to obtain benefits.
2. The purpose of this information collected is determining your eligibility for services.
3. The routine use of this information is by the QVIR Higher Education Program Coordinator to elevate your request and to assist you before and during your Higher Educational learning. After completion of your education, all of the information in your application will be provided to employers who are considering you for employment. The QVIR higher education Program Coordinator will use the application in a routine manner with the finance department, who need budgeting information.
4. Failure to provide requested information may result in a delay or denial in receiving assistance you are seeking

**I HAVE READ THE ABOVE STATEMENT. I HEREBY PROVIDE THE REQUIRED INFORMATION AND AUTHORIZE THE USE OF SUCH INFORMATION TO THE EXTENT OF USE SPECIFIED IN THE STATEMENT**

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

**Quartz Valley Indian Reservation  
Financial Needs Analysis**

**Student Information**

<b>Name:</b>	<b>Telephone #:</b>
<b>Mailing Address:</b>	
<b>Social Security Number: xxx-xx- _____</b>	<b>Student ID #:</b>
<b>Tribal Affiliation:</b>	<b>Enrollment #:</b>

**TO BE COMPLETED BY THE COLLEGE FINANCIAL ADVISOR**

This student has applied for Quartz Valley Indian Reservation (QVIR) Higher Education Grant. This applicant is required by the federal ruled/regulations to apply for college based aid, Pell Grant and other sources if aid available. Verified financial need information is needed through your office before QVIR can take action on this student's application.

**THANK YOU FOR YOUR ASSISTANCE**

**Breakdown of Budgeted Expense**

Budget Period: <b>From</b> _____ <b>to</b> _____, <b>which begins on (date):</b> _____		
<b>This Student is considered:</b> <input type="checkbox"/> Independent <input type="checkbox"/> Dependent		<b>Calculated Budget: \$</b> _____
<b>\$</b> _____ <b>Tuition &amp; Fees</b>	<b>\$</b> _____ <b>Books &amp; Supplies</b>	<b>\$</b> _____ <b>Room &amp; Board</b>
<b>\$</b> _____ <b>Transportation</b>	<b>\$</b> _____ <b>Personal &amp; Child</b>	<b>\$</b> _____ <b>Other</b>
<b>\$</b> _____ <b>Expected Parental Contribution</b> (Calculated from the SAR)		
<b>\$</b> _____ <b>Expected Student Contribution</b> (combination of school year, earnings, assets, & savings)		
<b>\$</b> _____ <b>Spouse Contribution</b> (if applicable)	<b>\$</b> _____ <b>Calculated Financial Need</b>	

**AID/RESOURCES**

<b>\$</b>	<b>PELL GRANT</b>	<b>\$</b>	<b>WORK STUDY</b>	<b>\$</b>	<b>SCHOLARSHIPS</b>
<b>\$</b>	<b>SOCIAL SECURITY</b>	<b>\$</b>	<b>VOCATIONAL SCHOOL</b>	<b>\$</b>	<b>VETERANS BENEFITS</b>
<b>\$</b>	<b>BOGG</b>	<b>\$</b>	<b>EOP/EOPS</b>	<b>\$</b>	<b>CAL GRANT</b>
<b>\$</b>	<b>OTHER</b>	<b>TOTAL AID</b>			<b>\$</b>

**WE RECOMMEND QVIR CONSIDER AWARDING THIS STUDENT: \$** \_\_\_\_\_

\_\_\_\_\_  
**Signature of Financial Aid Officer**

\_\_\_\_\_  
**Print Name**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**College Name**

\_\_\_\_\_  
**Email Address**

\_\_\_\_\_  
**Telephone Number**

**Mail to: Quartz Valley Indian Reservation Education Department**

13601 Quartz Valley Rd.

Fort Jones CA. 96032

Telephone Number: (530)468-5907    Fax Number: (530)468-5908    Email: [frieda.bennett@qvir-nsn.gov](mailto:frieda.bennett@qvir-nsn.gov)

# Quartz Valley Indian Reservation Higher Education

## Policy Acknowledgement

### HIGHER EDUCATION FUND POLICY ACKNOWLEDGEMENT FORM

**I hereby acknowledge and agree:**

1. That I have received and read a copy of the Higher Education Policy and agree to abide by this policy.
2. That I will comply with the rules and regulations outlined in this policy.
3. That this original acknowledgement will be placed in my QVIR Education file and maintained by the QVIR Education department.

\_\_\_\_\_  
Name of Applicant (printed)

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Education Representative (printed)

\_\_\_\_\_  
Education Representative's signature

\_\_\_\_\_  
Date