

Walter Charley Memorial Scholarship Application Form

The Ahtna Heritage Foundation (TAHF) was created to assist Ahtna shareholders in meeting their educational goals. The Walter Charley Memorial Scholarship, funds Ahtna shareholders who are either full or part-time students. Funding for the Walter Charley Memorial Scholarship is generously provided by Ahtna Incorporated and other donors.

TAHF will fund at the following levels:

Undergraduate programs	Graduate programs
Part-time status \$1,000	Part-time status \$1,500
Full-time status \$2,000	Full-time status \$3,000

Eligibility

The following requirements must be met to receive the WCMS:

New Applicants:

- Complete & signed application received by July 15, Fall deadline / December 15, Spring deadline
- Ahtna shareholder (Original or L Stock)
- High school graduate or GED
- Letter of acceptance to an accredited college, university or vocational school, or accepted in a program specializing in a recognized area of field of study
- Official proof of enrollment and registration, detailing your semester class units/credits.
- Official transcripts received by TAHF by **September 1, Fall deadline / February 1, Spring deadline**.
- Minimum of 2.00 GPA or higher as a high school or college student (not applicable as GED recipients)
- One page essay describing your personal goals
- Two letters of recommendation

Renewal Applicants:

- A complete & signed application
- Provide Official Proof of Enrollment and Registration, detailing your semester class units/credits.
- Official transcript

Please note that the application must be submitted by July 15, Fall deadline / December 15, Spring deadline, all other documents must be received by September 1, Fall deadline / February 1, Spring deadline. Scholarship decisions will be made and checks mailed to the school within 3 weeks. All applicants will be informed of award status via letter.

Application may be submitted by:

- Mailed applications must be postmarked and the stamp cancelled by the application deadline.
- Hand delivered items must be received in the TAHF office by 5pm and stamped/initialed by a staff member.
- Faxed and e-mailed applications (only to <u>ahtnaheritge@yahoo.com</u>) will be confirmed by the time stamp on the e-mail or fax and must be received by 11:59 PM of the application deadline.

Ahtna Heritage Foundation

Walter Charley Memorial Scholarship Application Form

Applicant Information					
Name: Last:	First:		MI:		
Mailing address:					
City:	State:	ZIP Code			
Phone:	Email:	Maide	n Name:		
Semester/Student Status					
Spring	Full-time # of Credits _		ndergraduate		
🗆 Fall	Part-time # of Credits	G	raduate		
New Applicant	Renewal Applicant	Year:			
Ahtna Status					
Enrolled Shareholder					
Class L Stock					
Your Ahtna or Village Affiliation					
Cantwell	Cheesh'na	Chitina	🗆 🛛 Kluti Kaah		
🗆 Gakona	Gulkana	Mentasta	Tazlina		
At-Large					
School Information					
School Name:					
Student ID # (needed for check pr	rocess): Main Pho	ne: Finan	cial Phone:		
Financial Aid Office Address:					
City:	State:	ZIP Code			
MAJOR: 1 st	2nd				
MINOR: 1 st	2nd				
Degree/ Certificate Information					
Degree/Certificate to be obtained		Target Compl			
	Associates	Masters	Doctorate		
	tional / Freshman / Sophomore / .	lunior / Senior *Cre	edits Needed:		
What other financial aid have you	u applied for?				
List any school, community, volu	nteer, and/or cultural activities, a	wards, honor societies, a	nd/or leadership, which		
you were involved.					
List any additional information or special circumstances you want the TAHF Scholarship Committee to consider.					
Please attach an additional sheet if needed.					
REGISTERED FOR SELECTIVE SERVICE- please check this box if you are male over the age of 18 and have registered for the					
selective service.					
Ahtna Heritage Foundation					

P.O. Box 213 Glennallen, AK 99588 Phone: (907) 822.5778 Fax: (907) 822.5338 Website: www.ahtnaheritagefoundation.com Email: ahtnaheritage@yahoo.com

Scholarship Conditions and Signature

By my signature below, I hereby certify that the information provided in this initial or renewed form is, to the best of my knowledge, true and correct, and that I have not knowingly withheld any facts or circumstances that could jeopardize consideration of my application; and by submitting this application I give Ahtna Heritage Foundation permission to verify any and all information in this application.

I understand that in order for my scholarship to be approved I must have maintained at least a 2.00 GPA during high school (not applicable if GED recipient). Or if a continuing student, I must have maintained at least a 2.00 GPA per funded semester, *and completed all the classes in which I have enrolled during last semester*.

I understand that the Ahtna Heritage Foundation Scholarship Committee will consider exceptions to the two above conditions (low GPA or incomplete classes) only in rare cases of extreme personal hardship during the last semester, including but not limited to, death in your close family, personal illness, and other personal hardship; and that a detailed letter of explanation and appropriate documents is required.

I understand my application and signature must be postmarked by the deadline. If my application is received after the Fall or Spring semester deadline, it will not be approved. I also understand that there is no exception to the deadline except in rare cases of extreme personal hardship during the last semester, including but not limited to, death in your close family, personal illness, and other personal hardship; and that a detailed letter of explanation and appropriate documents is required.

I understand that Ahtna Heritage Foundation must receive all other documents by the Spring deadline, September 1 / Fall deadline, February 1.

I authorize Ahtna Heritage Foundation and Ahtna Inc. to release my name in connection with any public announcement of scholarship award. I also authorize Ahtna Heritage Foundation to share my information to Ahtna Inc. Subsidiaries for future intern or job placement.

I understand that the scholarship, if awarded, will be paid directly to the institute, college, university, or program at which I am enrolled and registered.

Refer to the Walter Charley Memorial Scholarship Policy located on the website at www.ahtnaheritagefoundation.com

I have read and understood the above statements and will abide by the conditions of the award, if approved.

SIGNATURE	PRINTED NAME	DATE
PARENTS SIGNATURE	PRINTED NAME	DATE

Parent's signature required only if student is less than 18 years of age

Ahtna Heritage Foundation