

Comanche Nation Higher Education Job Placement & Training

Summer Associates of Applied Science Application

This application only applies to summer school funding



P.O. Box 908
Lawton, OK 73502
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Email: highered@comanchenation.com

Summer School Guidelines and Requirements

- The Comanche Nation Associates of Applied Sciences (JP&T-AAS) Scholarship is designed to assist students who are seeking an associates of applied sciences degree from a college/university.
- For summer scholarship assistance, students in their second year of the program, will be given first priority and will dependent on funds available, however, all Comanche students are encouraged to apply.
- The **deadline** to turn in the summer school application is **April 1st**.
- The summer scholarship is provided on a first-come, first-served basis.
- This summer scholarship is a separate application from the annual school year application. **This application only applies to summer school funding ONLY.**
- All documentation must be submitted before funding is released.

Eligibility Requirements

- ✓ Must provide proof of tribal membership (Comanche Tribal Enrollment Verification Form)
- ✓ Must be admitted for enrollment to an accredited institution of higher education

Students

- Students approved and receiving scholarship assistance from Comanche Nation Higher Education must maintain an acceptable academic standing and social conduct within the policies and rules of the college/university they are attending.
- Full-time students are required to carry a minimum of 6 hours for the summer session and earn a 2.00 Grade Point Average (GPA). Students must get prior approval from JP&T-AAS office before withdrawing from any class.
- Students with complete applications will be notified by letter of the approval or denial of their scholarship.
- A copy of your award letter will also be sent to the college Financial Aid Office.
- Students are personally responsible for their own housing arrangements, deposits or fees that are required for admission purposes. Therefore, make sure you have made arrangements for your deposits/fees before school begins.
- Student information given to CNHE-JP&T is considered “confidential.” This means the CNHE-JP&T staff cannot disclose or give access to any information given to the department without written consent from the applicant. The FERPA form is designed to give access to parties in which the student may give permission to the CNHE-JP&T staff to designate specific information to be released on the students’ behalf. Students can complete and sign this (FERPA) form and to designate the type of information they want to release to specific individuals that are listed on the form. If a student does not have a FERPA form signed, dated and designated for specifics, no information will be released from the CNHE-JP&T office.
- After the summer semester, students are required to send their official transcript before funds can be released for the fall semester.

Probation or Suspension Guidelines

- A student will be placed on **probation** when:
 - A student earns less hours than the number of hours they were funded for or
 - A students’ GPA is below a 2.00
 - Students have one semester to either pass with a 2.00 GPA or greater for the number of hours they were funded of the semester they became on probation.
 - For example, if you did not pass 12 hours in the Fall then you would be put on probation for the Spring semester. During the Spring semester you must pass 12 hours or more with at least a 2.00 GPA for all courses taken. If you do not pass the 12 hours you will be placed on suspension from the scholarship program.
 - Students must meet the requirement of the scholarship by the end of the probationary period or the student will be suspended from the scholarship.
- A student placed on **suspension** is required to go through a reinstatement process to be eligible to receive financial assistance from the CNHE Scholarship.
 - To be reinstated to the program after suspension, a student must earn at least 12 credit hours with a 2:00 GPA or higher on their own without tribal assistance.

**COMANCHE NATION HIGHER EDUCATION
ASSOCIATES OF APPLIED SCIENCE APPLICATION**

STUDENT INFORMATION:	PLEASE PRINT
Name: _____	Tribal # _____
Address: _____	D.O.B. ____/____/____
City, State, Zip: _____	SSN: _____
Email: _____	Home Phone: _____
	Cell: _____

ACADEMIC INFORMATION:	PLEASE PRINT
Semester applying for: <input type="checkbox"/> Summer	
College/Institution: _____ Major: _____	Classification: <input type="checkbox"/> Freshman <input type="checkbox"/> Sophomore
Student status: <input type="checkbox"/> Full-time (6 or more credit hours-SUMMER ONLY): _____	<input type="checkbox"/> Part-time (6 or less credit hours): _____
Credits earned to date: _____	Anticipated Graduation Date: Month _____ 20 _____
Have you received assistance from the Comanche Nation Office of Higher Education? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when? _____	
Have you completed the Free Application for Federal Student Aid (FAFSA)? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Signature of Applicant

Date

Signature of JP&T Specialist

Date

<u>FOR HIGHER EDUCATION OFFICE USE ONLY:</u>	
<input type="checkbox"/> Current Photo ID	<input type="checkbox"/> Class Enrollment Schedule
<input type="checkbox"/> CDIB Card	<input type="checkbox"/> Scholarship Disclaimer
<input type="checkbox"/> Official High School/College Transcript	<input type="checkbox"/> Notarized Consent
<input type="checkbox"/> Letter of Intent (Written and signed by you)	<input type="checkbox"/> CDIB Request Form
<input type="checkbox"/> Letter of Acceptance (From college/university)	<input type="checkbox"/> Official Verification of AAS degree



AAS Scholarship Disclaimer



The Comanche Nation Higher Education Associates of Applied Science Scholarship is **provided on a first-come first-serve basis**. Funding will **NOT** be provided unless the following criteria are met:

1. **A completed application with all required documents must be in the student's file:**
 - Application** – completed, signed and dated
 - CDIB** – Certificate of Indian blood verifying Comanche blood certified by the Comanche Nation enrollment office
 - Transcript** – Official high school or college of the last school you attended
 - Letter of Admission** – Official admittance to an accredited, post-secondary institutions by one of the regional agencies recognized by the Comanche Nation
 - Letter of Intent** – A personal letter stating why you want to attend college
 - Enrollment Verification** – Submit a class enrollment schedule of the semester you are requesting funding showing the date classes are being offered at the beginning of each semester. The schedule must show the name of the school you are attending. (Funding will not be released until our office receives this documentation)
 - Official Verification of A.A.S. degree** – A printed version of your degree track. This will include the degree you are seeking and how many credit hours are required for completion.

2. **It is the student's responsibility to follow-up and ensure documentation was received by the Higher Education Office. Contact our office via:**
 - Email:** highered@comanchenation.com
 - Phone:** (580) 492-3363 **Fax:** (580) 699-7242

3. **The deadline dates are as follows: Applications received after deadline will NOT be funded.**
 - Summer Semester – Application Deadline April 1

I have read and agree to the terms of this disclaimer and I understand this scholarship is provided on a first-come first-served basis and all documentation must be submitted before funding is released. I understand that I must meet the deadline for my scholarship to be funded.

Print Name

Signature

Date

**COMANCHE NATION HIGHER EDUCATION
ASSOCIATE OF APPLIED SCIENCE STATEMENT OF UNDERSTANDING**

PLEASE READ CAREFULLY BEFORE SIGNING AND DATING THE BELOW CONTRACT:

I, _____ confirm that I have read the statements below and will abide by them if accepted as a student on the JP&T program.

I have read the **Guidelines and Requirements** and understand all contents of the policies and do hereby agree to abide by all items listed.

I agree to notify the Comanche Nation Higher Education of any change in contact information. I also agree to provide a copy of my diploma and final transcript upon graduation.

I understand that if I am placed on probation/suspension by the school/institution, I am also considered on probation by the JP&T program. Financial assistance will only be provided as long as I observe the rules and guidelines. I understand that any scholarship/grant awards I receive are subject to nullification if I withdraw from classes or fail to maintain the required Grade Point Average (GPA) of 2.00. Furthermore, if I do not meet the suspension and probation requirements for the reinstatement process, I understand that I can be subject to termination from the program. I also acknowledge that I must get prior approval from the Director of Higher Education before withdrawing from any class.

I acknowledge that students are personally responsible for their own housing arrangements, deposits or fees that are required for admission purposes. Therefore, I understand that I must make sure I have made arrangements for deposits/fees before school begins

I hereby confirm that the information contained in this application is correct and true to the best of my knowledge.

PRIVACY STATEMENT: *The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. 1232g: 34 CFR Part 99) is a Federal law that protects the privacy of student education records. The law applies to recipients that receive Federal funding for educational purposes. These rights transfer to the student when he or she reaches the age of 18 or attends a school beyond the high school level. In accordance with this, the Comanche Nation Higher Education department will only discuss student information with the student applying for assistance.*

I have read and fully understand the Associate of Applied Science Statement of Understanding. I agree that no financial scholarship will be provided until the Director of Higher Education has certified my application and I receive an award letter from the Comanche Nation Higher Education office.

Signature of Applicant

Date

Signature of JP&T Specialist

Date

Certificate of Degree of Indian Blood (CDIB) Request Form

Dear **STUDENT**:

To complete your CDIB requirement, please fill out this form AND provide a copy of your CDIB card. Please fill out to the best of your knowledge, sign, and send form to:

COMANCHE NATION
ENROLLMENT OFFICE
P.O. BOX 908
LAWTON, OK 73502

OR

You may submit your form to our office and we will forward this form to the Office of Enrollment.

The Comanche Nation Office of Higher Education is requesting a CDIB for all students applying for scholarships.

The following information is herewith submitted:

NAME: _____ ROLL #: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

DOB: _____ SSN: _____

SPOUSE'S NAME: _____ ROLL: _____

FATHER'S NAME: _____ ROLL: _____

MOTHER'S NAME: _____ ROLL: _____

MOTHER'S MAIDEN NAME: _____

SIGNATURE: _____ DATE: _____

FOR ENROLLMENT OFFICE USE ONLY:

Please sign to verify the information provided is true and correct. Thank you.

SIGNATURE: _____ DATE: _____

PRIVACY STATEMENT

The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. 1232g; 34 CFT Part 99) is a Federal law that protects the privacy of the student education records. The law applies to recipients that receive Federal funding for educational purposes. These rights transfer to the student when he or she reaches the age of 18 or attends a school beyond the high school level.

In accordance with the FERPA Law:

The Comanche Nation Office of Higher Education will discuss information with the student applying for assistance only.



Please read The Family Educational Rights and Privacy Act (FERPA) law and sign the privacy statement located at the bottom of the Comanche Nation Scholarship Application.

FERPA CONSENT TO RELEASE STUDENT INFORMATION

TO: _____
(Name of University Official and Department that will be releasing the educational records)

Please provide information from the educational records of _____ [Name of Student requesting the release of educational records] to:

_____ [Name(s) of person to whom the educational records will be released, and if appropriate the relationship to the student such as "parents" or "prospective employer" or "attorney"]

(Note: this Consent does not cover medical records held solely by Student Health Services or the Counseling Center – contact those offices for consent forms.)

The only type of information that is to be released under this consent is:

- _____ transcript
- _____ disciplinary records
- _____ recommendations for employment or admission to other schools
- _____ all records
- _____ other (specify) _____

The information is to be released for the following purpose:

- _____ family communications about university experience
- _____ employment
- _____ admission to an educational institution
- _____ other (specify) _____

I understand the information may be released orally or in the form of copies of written records, as preferred by the requester. I have a right to inspect any written records released pursuant to this Consent (except for parents' financial records and certain letters of recommendation for which the student waived inspection rights). I understand I may revoke this Consent upon providing written notice to [Name of Person listed above as the University Official permitted to release the educational records]. I further understand that until this revocation is made, this consent shall remain in effect and my educational records will continue to be provided to [Name of Person listed above to whom the educational records will be released] for the specific purpose described above.

Name (print) _____

Signature _____

Student ID Number _____

Date _____