

Department of Education / Education Resources Division Postsecondary Education / Higher Education Program

300 Rosedale Road / Ada, OK 74820 / (580) 421-7711 / Email address: Higher.Education@Chickasaw.net Website: <u>www.Chickasaw.net/highered</u>

Native American Business Scholars Academy Scholarship Application

The Chickasaw Nation is pleased to offer Chickasaw students funding assistance for college. The Chickasaw Nation offers the Native American Business Scholars Academy Scholarship in partnership with Oklahoma City University's Meinders School of Business and the Native American Business Scholars Academy. This scholarship is designed to support higher education and lead students to earn a bachelor's degree in business. Students receive additional benefits that may include a variety of tribal business-focused seminars and workshops, internships, attending meetings with the business dean, networking opportunities with local, regional and national business leaders and participation in special on and off-campus events.

After completing the attached application and providing us with the required documentation, your application will be reviewed for consideration of funding. Students selected as finalists will be required to participate in the interview portion of the selection process on campus at Oklahoma City University. All scholarships offered by the Chickasaw Nation are for Chickasaw citizens only. No student will be considered for funding who does not have a Chickasaw Nation citizenship card or Chickasaw citizenship confirmation. Applications and documentation can no longer be submitted by fax. All scholarship applications and supporting documentation must be delivered via postmarked U.S. Postal Service, email or in person to the department of education office by the end of business day on the stated deadline date: September 15 for the fall semester; February 15 for the spring semester. Funding will not be disbursed until all documents are received, including the student's semester enrollment.

SCHOLARSHIP AWARD

The scholarship will be awarded to a limited number of new recipients each year selected by a scholarship selection committee. The decision of the committee will be final. Scholarships are eligible for renewal each year thereafter until graduation, so long as the requirements are met. Eligible students must be in their final semester of an accredited high school or a recent graduate from an accredited high school, with a cumulative GPA of 3.0 or higher and an ACT score of 22 or higher; meet all admission requirements of Oklahoma City University and major in a business-related discipline. Programs offered included accounting, business administration, finance, economics, marketing and software engineering. Native American Business Scholars Academy scholarship recipients will be awarded tuition scholarships covering full-time tuition for eight consecutive semesters. Fees, housing and meals are not included in the scholarships. Students receiving tuition scholarships will maintain full-time enrollment and a cumulative GPA of 3.0 or higher.

Students may contact the higher education office at (580) 421-7711 for additional scholarship information.

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Deadillies are Se	eptember 15 for the fall semest	er, rebruary 15 for the spri	ing semester.	
Semester applying for tuition fu	unding: □ Fall 20	_ □ Spring 20	_	
<u>Degree</u> : □ Bachelor's				
Personal information:				
Name:				
Name:First	Middle		Last	Suffix
Maiden:	Birth date:		Gender: □ Male	☐ Female
Mailing address:				
Street	City		State	ZIP
Physical address: Street	City		State	ZIP
Home phone no.: ()			: ()	
Email address:	_	•	\/	
responsible for checking their em College information: College attending:			ndence.	
Mailing address:	City		State	ZIP
Phone no.: ()	Fax no.: (_)	Student ID no.:	
Field of study:		Expected graduatio	n date:	
College classification: ☐ Freshma	an □ Sophomore □	Junior ☐ Senior		
Disclaimer:				
Any dispute over student eligibility decision of the Chickasaw Nation			ostsecondary Edu	cation. The

Ackno	wledgment:
(Initial)	The information contained in the application will be considered "confidential information" and will not be disclosed to third persons, except upon written authorization of the student or as otherwise required by law. I will use any funds I receive from the Chickasaw Nation Higher Education Program solely for expenses connected with attending Oklahoma City University.
(Initial)	I have read and understand the Chickasaw Nation Higher Education Student Handbook (see MAN 10 ER 1000) concerning the Chickasaw Nation Higher Education programs as they are related to funding students who are attending college. These policies may be changed.
(Initial)	The information I have provided is complete and accurate. Falsifying any information or document included with my application may result in the revocation of any scholarship granted to me and may also result in my suspension from future Chickasaw Nation grants, programs and scholarships opportunities.
□ Yes	□ No I authorize the Chickasaw Nation Higher Education Program to release any information herein, including but not limited to, my name and birth date, to the necessary agencies, including the National Student Clearinghouse, in order to complete my financial aid package or to be cross-referenced with college graduation records for verification or retention data.
□ Yes	□ No I would like to receive additional information about Chickasaw Nation opportunities, events, scholarships, internships and other educational information by phone, email or text.
1. Hov	cale of 1 to 5, with 5 being very satisfied: v would you rate your satisfaction with the service you received? – Very dissatisfied □ 2 – Dissatisfied □ 3 – Neutral □ 4 – Satisfied □ 5 – Very satisfied
	v would you rate the overall ease of the application? – Very difficult □ 2 – Difficult □ 3 – Neutral □ 4 – Easy □ 5 – Very easy
pro	w would you rate your overall experience of the Chickasaw Nation Higher Education Program cess? — Very poor □ 2 – Poor □ 3 – Average □ 4 – Good □ 5 – Very good
Student si	gnature Date
	<u> </u>
	pal guardian signature (if applicable) Date
Docum Nati Curi Stud (Beg	entation submitted: ve American Business Scholars Academy Scholarship Application rent college class schedule dent Authorization for Disclosure of Information in Education Records ginning freshmen or new applicants or renewals if not on file) fficial college transcript (If you have college credit hours) ount summary showing detailed billing charges to the student's account with Oklahoma City University



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Student Authorization for Disclosure of Information In Education Records

Pursuant to Family Educational Rights and Privacy Act of 1974, as amended

Instructions:

To authorize the Chickasaw Nation Department of Education to obtain your educational information and to authorize the Chickasaw Nation Higher Education Program to release your educational information to individuals or the college/university you are attending.

- 1. Fill out all appropriate fields on this form; and

	orms will not be accepted without		
First name:			
Middle name:			
Last name:			
Suffix:			
Birth date:			
I hereby author the following in	dividual(s) or college/university:		am to disclose my education record(s) to
Indivi	dual/college/university name	Birth date of individual	Disclosure of educational records
			☐ authorize ☐ revoke authorization
			☐ authorize ☐ revoke authorization
			O outhorize O reveles outhorization
	ize/revoke the following individual(s) ion Higher Education Program:	or college/university	□ authorize □ revoke authorization to release my education record(s) to the
Chickasaw Nat		or college/university to Birth date of individual	1
Chickasaw Nat	ion Higher Education Program:	Birth date of	to release my education record(s) to the Release of educational records authorize revoke authorization
Chickasaw Nat	ion Higher Education Program:	Birth date of	to release my education record(s) to the Release of educational records authorize revoke authorization authorize revoke authorization
Chickasaw Nat	ion Higher Education Program:	Birth date of	to release my education record(s) to the Release of educational records authorize revoke authorization
Chickasaw Nat	ion Higher Education Program: ual(s)/college/university name	Birth date of	to release my education record(s) to the Release of educational records authorize revoke authorization authorize revoke authorization
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Chickasaw Nat Individ Authorization: I hereby author or individual(s)	ion Higher Education Program: ual(s)/college/university name ize the	Birth date of individual	to release my education record(s) to the Release of educational records authorize revoke authorization authorize revoke authorization authorize revoke authorization tional record(s) to the above-mentioned
Authorization: I hereby author or individual(s)	ion Higher Education Program: ual(s)/college/university name ize the	Birth date of individual	to release my education record(s) to the Release of educational records authorize revoke authorization authorize revoke authorization authorize revoke authorization revoke authorization tional record(s) to the above-mentioned y educational record(s) to/from