

Walter Charley Memorial Scholarship

The Ahtna Heritage Foundation

P.O. Box 213 ~ Glennallen, AK 99588 ~(907) 822-5778 ph ahtnaheritage@yahoo.com

Dear Scholarship Applicant:

The Ahtna Heritage Foundation (TAHF) is excited you are actively pursuing your education goals. Ahtna Shareholders are eligible for the Walter Charley Memorial Scholarship. Full-time students are eligible for up to \$2000.00 per Fall and Spring Semester and Part-time students are eligible for up to \$1000.00 per Fall or Spring Semester. Walter Charley Memorial Scholarship will be paid directly to the institution, college or university in which you are enrolled and registered.

To be **eligible** of the Walter Charley Memorial Scholarship, you must be:

- A high school graduate or have a GED
- An Ahtna Shareholder
- Accepted to an accredited college, university or vocational school, or accepted in a program specializing in an recognized area of field of study
- Registered as a Full or Part-time student in college, vocational school or recognized program specializing in an accepted area of field or study
- Have a 2.00 GPA as a high school or college student (not applicable as GED recipients)

NEW APPLICANTS: To **apply** for the Walter Charley Memorial Scholarship you will need to submit:

- A **complete application** (please type or print legibly in ink)
- A **letter of acceptance** from the school you plan to attend
- Documentation** proving you are an Ahtna Shareholder
- A **one-page letter** describing your personal goals
- An **Official Transcript** (from your high school or if a continuing student, higher education institute) Not from the Internet
- Provide **Official Proof of Enrollment and registration, detailing your semester class units/credits (Anything printed from the Internet will not be accepted)**

RENEWAL W.C.M.S. Students - To be **awarded** a continuing Walter Charley Memorial Scholarship you must provide:

- A complete application (please type or print legibly in ink)
- Provide **Official Transcripts or other official verification** showing you completion of previous classes attended and that you maintain a 2.00 GPA
- Provide **Official Proof of Enrollment and registration, detailing your semester class units/credits. (Anything printed from the Internet will not be accepted)**

If your application is not complete, scholarship awards cannot be issued until we receive all items detailed above. Be sure to sign the application and complete all sections.

It is **not necessary to fax, e-mail, express mail, UPS, FedEx, or send you application** by any other special delivery. Just make sure the post office postmarks (cancels you stamps) on or before the deadline. Send your application and all other items in one envelope to:

**The Ahtna Heritage Foundation
Attn: Walter Charley Memorial Scholarship
P.O. Box 213
Glennallen, AK 99588**

The postmark deadline for:

- **Fall - July 15**
- **Spring - December 15**

NO LATE OR INCOMPLETE SUBMISSIONS WILL BE ACCEPTED.

Scholarship decisions will be made and checks mailed to the school three to four weeks after final approval. All applicants will be informed of award status by letter.

If you have any questions or need help filling out the application, please contact us by phone at (907) 822-5778 or by e-mail at ahtnaheritage@yahoo.com. We're here to help. Best wishes!

SCHOLARSHIP CONDITIONS & SIGNATURE

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 TAHF permission to verify any and all information in the 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 maintain a 2.00 GPA, and I complete all the classes in which I was enrolled during that last semester.

I understand that the TAHF Scholarship Committee will consider exceptions to the two above conditions only in rare cases of extreme personal hardship during the last semester, including, but 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.

If my application is received after the Fall or Spring semester, it cannot and will not be considered or accepted. I understand that TAHF must receive the Official Transcripts & Proof of Enrollment before the final completion deadline date set for each semester.

I authorize TAHF and Ahtna, Incorporated to release my name in connection with any public announcement of scholarship award. I also authorize TAHF 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.

I understand that I must send all required application items in one envelope to:

**The Ahtna Heritage Foundation
P.O. Box 213
Glennallen, AK 99588**

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

Signature

Printed Name

Date

Parent's Signature

Printed Name

Date

*(Parent's signature required **only** if applicant is under the age of 18)*

Walter Charley Memorial Scholarship
Application

***- Needs to be answered to be complete**

Please type or print legibly in ink

1. * WHAT SEMESTER & YEAR YOU ARE APPLYING FOR?

_____ Fall _____ Spring _____ Year
_____ New Applicant _____ Renewal Applicant

2. * STUDENT STATUS:

_____ Full-time _____ Part-time

3. * YOUR PERSONAL INFORMATION:

NAME

Last _____ First _____ Middle _____

YOUR ADDRESS:

P.O. Box or Street _____

City _____ State _____ Zip Code _____

YOUR CONTACT INFORMATION:

Telephone _____ E-mail _____

4. * YOUR AHTNA STATUS:

_____ Enrolled Shareholder _____ Class L Stock

5. * YOUR AHTNA OR VILLAGE AFFILIATION:

_____ Cantwell _____ Cheesh-na _____ Chitina _____ Gakona _____ Gulkana
_____ Kluti-Kaah _____ Tazlina _____ Mentasta _____ At-Large

6. List any additional information or special circumstances you want the TAHF Scholarship Committee to consider. Please attach an additional sheet if needed.

7. * SCHOOL INFORMATION: (remember to send us your Official Transcript or GED verification)

School Name: _____

School Main Phone _____

Financial Aid Office Address: _____

City: _____ State: _____ Zip Code: _____

*** YOUR MAJOR:** _____

*** DEGREE TO BE OBTAINED:** _____

*** YEAR IN SCHOOL:** _____ Vocational _____ Associates _____ Freshman

_____ Sophomore _____ Junior _____ Senior _____ Masters _____ Doctorate

8. * WHAT OTHER FINANCIAL AID HAVE YOU APPLIED FOR OR RECEIVING?

9. List any school, community, volunteer, and/or cultural activities, awards, honor societies, and/or leadership, which you were involved.

Cost of Tuition/Books Per Semester:

Tuition: \$ _____

Books: \$ _____

TOTAL: \$ _____