

2010-11 Vocational Scholarship Application

The Chugach Heritage Foundation (CHF) offers scholarships to support students seeking vocational certificates and job training.

Application Deadline: There are no deadlines for vocational scholarships.

Qualifications

An applicant for the CHF Scholarship Program must be:

- An original shareholder or legal descendant (by birth or adoption) of an original shareholder of the Chugach Alaska Corporation.

Complete application packets must include the following:

New Applicants

1. Copy of birth certificate(s) that link to the original shareholder; or copy of legal adoption papers.
2. Signed and completed application.
3. Verification or registration of vocational/training program (to include program dates and total cost).

Repeat Applicants

1. Signed and completed application.
2. Verification of registration of vocational/training program (to include dates registered and total cost).

Scholarship Amounts

Vocational Training funding is limited to \$4,000 per calendar year. This funding will be awarded to students registered for training that will broaden their employment opportunities or maintain their skill level. For example: HAZWOPER certification or any classes required to maintain job-related licenses.

Check Disbursement

- Scholarship checks are issued to the school on behalf of the student.
- Upon receipt of completed application packet a check will be issued the school.

If you have any questions or would like assistance completing this application, please contact:

Chugach Heritage Foundation

Phone: (907) 563-8866

Direct: (907) 550-4535

Toll Free (800) 858-2768

stephen.grantier@chugach-ak.com or scholarships@chugach-ak.com

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A. Application Status

<input type="checkbox"/> NEW APPLICANT <input type="checkbox"/> REPEAT APPLICANT	PROGRAM DATES:
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B. Applicant Information

LAST NAME		FIRST NAME		M.I.
PERMANENT ADDRESS		CITY	STATE	ZIP
HOME PHONE ()	WORK PHONE ()	CELL PHONE ()	E-MAIL ADDRESS	
SOCIAL SECURITY NUMBER	DATE OF BIRTH	CHUGACH ENROLLMENT NUMBER (IF KNOWN)		

C. Vocational Program Information

NAME OF PROGRAM/MAJOR		<input type="checkbox"/> LICENSE <input type="checkbox"/> CERTIFICATE		
VOCATIONAL INSTITUTION		STUDENT ID		
FINANCIAL AID OFFICE ADDRESS		CITY	STATE	ZIP
PHONE ()	FAX ()	E-MAIL ADDRESS		

D. Affiliation Disclosure

Are you a legal descendant of anyone currently serving on the Board of Directors of Chugach Alaska Corporation?

NO YES Name of Board Member _____

Are you a legal descendant of anyone currently serving on the Board of Directors of Chugach Heritage Foundation?

NO YES Name of Board Member _____

Signature of Applicant _____ Date _____

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F. Privacy Disclosure

Chugach Heritage Foundation uses appropriate security measures to protect your personal information. CHF does not share any personal information with other entities outside Chugach Alaska Corporation.

G. Statement of Correctness, Understanding, and Authorization

Application Information. I hereby attest that the information which I have provided and which is contained in this application is true, correct and complete.

Use of Funds. I understand that the proceeds of the scholarship, if approved, will be used to complete the program for which I am registered.

Successful Completion of CHF Funded Vocational Program:

By accepting scholarship funding the student agrees to successfully complete the program for which funding is provided. Successful completion is defined by receipt of license or certificate.

Failure to meet this obligation will place your status with CHF on hold. Being placed on hold will prevent the recipient from receiving any further funding.

Holds may be removed in several ways –

- 1) Repayment to CHF the portion of funding associated with any unsuccessfully completed course work.
- 2) Use student's own funding to successfully complete the CHF funded course deficiency.
- 3) Contact the Scholarship Manager to request placement in probationary status during which CHF funding will continue. Student must submit in writing (email or hard copy) an explanation of the circumstance which resulted in failure to meet obligations. The Scholarship Manager will then make a decision regarding award of probationary status.

I have read and understand the above "Statement of Correctness, Understanding and Authorization" and, if approved, I agree to abide by the terms and conditions of the scholarship. I understand I will not receive funding if the application packet is not received by CHF in its entirety by August 15.

Signature of Applicant _____ Date _____