

2015-2016 Scholarship Application

Harvey Samuelsen Scholarship

Eligibility Requirements

In order to be considered for the Harvey Samuelsen Scholarship, you must meet the following requirements:

- Be a resident of a Bristol Bay CDQ community: Aleknagik; Clarks Point; Dillingham; Egegik; Ekuk; Ekwok; King Salmon; Levelock; Manokotak; Naknek; Pilot Point; Port Heiden; Portage Creek; South Naknek; Togiak; Twin Hills; Ugashik.
- ✤ High school diploma or GED
- * Be enrolled in an accredited college or university
- * Be able to demonstrate financial need
- * Be registered as a "Full-time" student, pursuing an Associates degree or higher
- * Undergraduate students must have a minimum 2.0 cumulative GPA
- * Graduate students must have a minimum 3.0 cumulative GPA

Application Deadline is June 30, 2015

If you have any questions regarding eligibility, call BBEDC at 1-800-478-4370 or 1-907-842-4370

Harvey Samuelsen Scholarship

Application Checklist

In order for your application to be complete, you must submit the following documents:

- Completed Application
 - ✓ BBEDC Residency Form with required attachments (photo ID + one additional doc.)
 - ✓ High School or College Transcript (can be an unofficial transcript but must show Spring 2015grades.)
 - ✓ Letter of Interest
 - ✓ Copy of School's Letter of Acceptance (Incoming Freshman and transfer students only)
 - ✓ Release of Information Form
 - ✓ Copy of Cost of Attendance sheet from University
 - ✓ BBEDC Relationship Disclosure Form

BBEDC Residency Form must be completed every 12 months

Transcripts are required

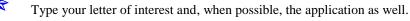
Applications must be mailed or hand delivered to BBEDC's Dillingham Office. Mailed applications must be post-marked by June 30, 2015.

Application Suggestions:

Submit application as soon as Spring term 2015 grades have been posted.



Remember only **complete** applications will be considered (It is **your** responsibility to make sure your application is complete).



Double-check your financial budget sheet, this information must be accurate! (Make sure your math is correct).

Submit your application and all required documents in the provided pre-addressed envelope.

Mail your applications to:

Bristol Bay Economic Development Corporation P.O. Box 1464 DillinghamAK99576

If you have any questions or need assistance with your application, call BBEDC at: 1-800-478-4370 or 1-907-842-4370



Harvey Samuelsen Scholarship Trust

P.O. Box 1464, Dillingham, AK99576 (907) 842-4370 * 1-800-478-4370 Fax: (907) 842-4336 * 1-888-325-4336

PERSONAL INFORMATION:

First Name:	Last Name:	
SSN:	_Student ID #	
Date of Birth:	_	
Home Address:		
City:	_ State:	Zip:
Home Phone:	_	
Dorm room or apartment address:		
City:	_ State:	Zip:
Dorm room/apartment phone # or cell phone#:		
Community and State of Residency:		
E-Mail Address:	_	

Application Deadline is June 30, 2015

High School attended:		Graduation Date:
GED Date:		
School currently attending:		
School planning to attend:		
Address of Financial Aid office:		0
City:	State:	Zip:
Financial Aid Office Phone:		-
Have you applied for admission? Yes	□ No □ Been accep	oted? Yes 🗌 No 📋
University Class Standing: 1 st year] 2 nd year [] 3 rd year [☐ 4 th year + ☐ Graduate School
College credits earned to date:		
College Major:	Expected Graduati	on Date:
Expected Degree: Associate	Bachelor Master	Doctorate 🗌
Number of credit hours in which you	plan to enroll: FallV	Vinter Spring Summer
School on: Quarters Semester	ers Trimesters	
Cumulative GPA:		
		s June 30, 2015

FINANCIAL INFORMATION

FINANCIAL AID

Please list all sources of financial aid (loans, scholarships, grants, etc.) you are applying for:

Name of Scholarship, Grant, etc.	Expected Date of	Amount	Amount Received, Approved
	Notification	Requested	
		-	
Total of Financial Aid Requested			
Total of Financial Aid Approved			
(Attach additional page if needed)			

SCHOOL YEAR EXPENSES

(Note: These figures must be as accurate as possible as we will verify them with the school you will be attending. Any intentional misrepresentation of your financial information will disqualify you from receiving any scholarship from the Bristol Bay Economic Development Corporation. If you are unsure of what your expenses will be, contact the university or college you will be attending.)

Tuition		
Fees/Due		
Room/Rent		
Meals/Food Expense		
Books & Supplies		
Travel (Limited to 2 R.T. tickets)		
Child Care		
Miscellaneous:	Clothing (maximum allowed is \$300)	
	Entertainment (maximum allowed is \$250)	
Total School Year Expenses		

FINANCIAL NEED

Total School Year Expenses (Table 2)	
Total Amount of Funds Approved (Table 1)	
Total Estimated Financial Need	

LETTER OF INTEREST

Your letter of interest should be no longer than one typed page and should address the following questions:

- 1. What are your educational and career goals?
- 2. What are you contributing to your education?
- 3. Why should you be selected to receive a scholarship?

If you fail to address the above questions in your letter of interest, your application may be deemed incomplete and therefore you will not receive an award. Do not submit the same letter that was submitted with prior year applications.

By signing this page and also your attached letter, you affirm that this is your own original work and understand that if it is not, your application may be rejected and any award granted may be canceled.

I, ______ certify that the information herein, financial or otherwise, is correct and any intentional misrepresentation therein will negate my participation now and hereafter in the Scholarship Program administered by Bristol Bay Economic Development Corporation.

Applicant's Signature: Date:

Application Deadline is June 30, 2015

AUTHORIZATION FOR RELEASE OF INFORMATION

I hereby authorize the release of any and all inform	ation contained in	city councils,	village councils,	state,
federal, private or educational agencies' records to the	organization below	/:		

BRISTOL BAY ECONOMIC DEVELOPMENT CORPORATION P. O. Box 1464 Dillingham, Alaska99576 Fax Number 1-888-325-4336 (In state) 907-842-4336 (Out of state)

This information is to be used for the verification of the eligibility of:

This authority shall continue in effect until this student is no longer enrolled in the Harvey Samuelsen Scholarship Program.

Signature:	Date		
Social Security Number:	Date of Birth		

I hereby authorize BBEDC to publicize my name, institution, degree and major, year in college, and village of residency to further encourage youth of the Bristol Bay Region to obtain higher education. In addition, I authorize the same organizations to provide my name for employment purposes. This authority shall continue in effect until I am no longer in the Harvey Samuelsen Scholarship Program.

Signature_____

Date

Application Deadline is June 30, 2015