#### This application is for continuing students.

#### Application deadlines: July 15 for fall semester and December 1 for spring semester.

####  Please read through our program policies prior to completing this application. Applications with incomplete information will not be processed.

|  |  |
| --- | --- |
| Date of birth |  |
| Tribal affiliation |  |
| Semester applying for  |  |
| Mailing address while at school |  |
| Permanent mailing address |  |
| Daytime telephone number |  |
| Cell phone number |  |
| Email address |  |
|  | Your email address will be used for information exchange purposes only. |
| School’s name |  |
| School’s address |  |
| School’s phone number |  |
| School’s fax number |  |
| Registered degree program |  |
| No. of credits completed |  |
| Expected graduation date |  |
| Grade point average (GPA) |  |
| No. of credits registered for |  |

#### Essay

Please write an essay (500 word minimum) in which you reflect on your academic progress and how your progress is shaping your future plans as a Caleb Scholar.

#### Additional Information Required

Please submit your academic transcripts (electronic or paper) and proof of registration (indicating full time enrollment) with this application. Applications received **without** this information will be considered incomplete and **will not** be considered for award funds.

#### Statement of Understanding

I hereby attest that the information contained in this application is true, correct, and complete. I understand that if I have intentionally misrepresented information on this application or supplemental documentation, I will be required to return all scholarship funds and issue a formal apology to the Selection Committee.

**I further understand that to maintain my eligibility for a continuing scholarship, I must submit transcripts and proof of enrollment each term to the Program Specialist**. I give permission for

Kawerak, Inc. and the Oak Foundation to publish my name, photograph, school information, and any other information I provide in any reports, press releases, or publications.

|  |  |
| --- | --- |
|  |  |
| Signature | **Date** |

#### Please submit this application and additional documents via email to:

cpp.spec@kawerak.org

*Please limit each file to 250 KB.*

#### Program Contact Information:

Caleb Scholars Program

Kawerak, Inc.

PO Box 948

Nome, Alaska 99762

 (907) 443-4361