



## STC Discretionary Scholarship

The STC Discretionary Scholarship is a commitment made by STC Council as an integral part of its long-term strategy to increase qualified tribal members and qualified workers in Skagway. As well as to award Skagway School graduates with their commitment to seek further education in an accredited school.

STC Scholarship program currently provides up to \$1000 per year funded by STC. (One lifetime award per applicant)

For required documents please see instructions.

**DEADLINE TO SUBMIT ALL REQUIRED DOCUMENTS WITH APPLICATION:**

**April 15th**

Submit your completed application and required documents by postal mail, email or hand deliver to:

Skagway Traditional Council

ATTN: Scholarships

PO Box 1157

Skagway, AK 99840

OR BY EMAIL

[Administrator@skagwaytraditional.org](mailto:Administrator@skagwaytraditional.org)

IF, emailing your application with required documents, please send the application and supporting documents as a black and white PDF file and title the email **year-SCHOLARSHIP APPLICATIONS-**

**Lastname**

Faxed Applications WILL NOT be accepted.

Application must be postmarked ON or BEFORE deadline.

**NO EXCEPTIONS FOR LATE DOCUMENTS.**

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*STC Discretionary Scholarship Application*

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Year Applying for \_\_\_\_\_

Have you received this application in the past? No Yes (If YES: stop here. This scholarship is limited to one life time award)

**Applicant Information**

Name: \_\_\_\_\_

SS# or Student # & school (indicate which one) \_\_\_\_\_  
(This is needed to distribute the scholarship funds into the correct student account)

Home Phone \_\_\_\_\_ Cell phone \_\_\_\_\_

Email Address: \_\_\_\_\_

Current Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Permanent Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Which is the best way for STC to get in touch with you? (Circle one)

Phone      Email      Current Address      Permanent Address

**Eligibility Information (Only one proof is needed Skagway HS or tribal membership)**

High School Graduation Date \_\_\_\_\_ Skagway HS? (Circle one) YES NO  
(If not a Skagway HS graduate or graduate from previous years, tribal enrollment is required)

Tribal Enrollment # \_\_\_\_\_ (please attach proof of Skagway Tribal Enrollment)

**Education Information**

What was you HS GPA or last attended College/University GPA? \_\_\_\_\_ of \_\_\_\_\_

College/University/Professional Certificate School you will be attending

Name of school \_\_\_\_\_ Phone Number \_\_\_\_\_

Address of School \_\_\_\_\_  
\_\_\_\_\_

What degree will you be pursuing? (Circle one) Associate Bachelor Master PhD Other

Major \_\_\_\_\_ Minor (optional) \_\_\_\_\_

Expected Graduation Date \_\_\_\_\_

**Certification of Application:**

As part of applying for the STC Scholarship you are agreeing to the eligibility criteria:

I agree to maintain a 2.5 on a 4.0 grade scale to be eligible for scholarships.

If required I will be responsible to submit any documents on a timely manner.

I understand that providing false information will be grounds for denied scholarship application.

I will use scholarship funds awarded to me under the STC Higher Education/Scholarship Program solely for approved educational expenses.

I understand if I do not complete the year I am funded, STC may request repayment of funds.

I understand that tribal members will have extra points towards grading of the scholarship applications. I certify that the information contained within this application is true to the best of my knowledge. I understand that misrepresentation of fraudulent information may be grounds for loss of scholarship funds and IF funded repayment. I understand that I will report any changes to STC at such time changes have been made within the semester.

I understand this is a one-time scholarship and that **if funded** I can no longer apply for this scholarship in the future.

**I certify that the information on this application is true and correct to the best of my knowledge and give consent to the release of my information to pertinent agencies to complete my scholarship package.**

Students Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date \_\_\_\_\_