



October 1, 2021

TO: CTER Staff & CTER Board of Directors, & TERO Regions
FROM: Tamara Strong, CTER Scholarship Committee
SUBJECT: 2021 ITCHE SHIKAAKE Scholarship Application

Attached is the Council for Tribal Employment Rights (CTER) 2021 ITCHE SHIKAAKE Scholarship Application for our use and distribution. NOTE the deadline of October 31, 2021 for submission of the application. You are strongly encouraged to copy and distribute the application to all interested tribal entities as soon as possible. In addition to our TERO's, please share copies with any and all of the following entities and others as you may deem appropriate:

- Indian and Native American Employment & Training Programs
- Tribal Higher Education Programs
- Tribal and Other Local Public Schools
- Native American Youth Groups
- Tribal Community Youth Organizations
- Tribal Youth Internship Programs
- Others

The 2021 ITCHE SHIKAAKE Scholarship is a one-time award of \$2,000.00 and will be awarded at the Annual Legal Update Conference at *The Orleans Hotel & Casino, 4500 W Tropicana Avenue, Las Vegas NV 89103.*

The Council for Tribal Employment Rights appreciates your valuable assistance in getting this application to the appropriate individuals, groups and organizations.

Thank You,

Tamara Strong, CTER Secretary
Scholarship Committee

**COUNCIL FOR TRIBAL EMPLOYMENT RIGHTS
ITCHE SHIKAAKE
2021 SCHOLARSHIP APPLICATION**

CRITERIA FOR APPLYING:

- 1. Must be enrolled in a Federally Recognized Tribe, and/or a member of a tribe or entity that operates a TERO Program. A copy of Tribal Enrollment Card and copy of Tribal Membership number must be attached with this application.**
- 2. Must have a Letter of Acceptance from the university, college, junior college, technical, vocational school you will attend; must be currently enrolled and/or accepted at time of this application.**
- 3. Must be currently enrolled in school and have a three (3.0) grade point average (GPA). Applicant may be a High School graduate in the Spring Semester of 2020 and 2021.**
- 4. A current official school transcript must be submitted with this application.**
- 5. Must attach three (3) Letters of Reference with this application.**
- 6. A one-page narrative of applicants educational and career goals must be submitted with this application.**

APPLICATION MUST BE POSTMARKED & SUBMITTED BY October 31, 2021 TO:

**Council for Tribal Employment Rights
c/o APE Bookkeeping
P.O. Box 1629
Veradale, WA 99037**

**FAX: 509-931-6100
Email: cterape@gmail.com**



COUNCIL FOR TRIBAL EMPLOYMENT RIGHTS
"ITCHE SHIKAAKE"

2021 SCHOLARSHIP APPLICATION

(Please Print)

Today's date: _____

PERSONAL INFORMATION

Last name: _____ First: _____ MI: _____ Mr. Mrs. Miss Ms. Marital status (circle one)
Single / Mar / Div / Sep / Wid

Is this your legal name? Yes No If not, what is your legal name? _____ (Former name): _____ Birth date: ____/____/____ Age: _____ Sex: M F

Street address: _____ Social Security no.: _____ Home phone no.: _____
()

P.O. Box: _____ City: _____ State: _____ ZIP Code: _____

EDUCATION INFORMATION

Name of High School from which you graduated: >>>> _____ Year: _____

Name and address of Selected/Enrolled College/ University/ Technical/ Vocational School: _____ Business phone no.: _____
()

Address/P.O. box: _____ City: _____ State: _____ ZIP Code: _____

Are you currently enrolled in a College or University? Yes No If checked "Yes" box, which of the following is your enrollment status:
Less than 12 hours: 12 Hours or more: OTHER: _____

Are you receiving other Financial Aid? Yes No If Marked "Yes" box please indicate:
Amount: \$ _____ Amount of need: \$ _____

Expected Graduation Date of Graduation: (from College or University) (Example: SPRING 2017) Semester: _____ Year: _____

Expected Degree: AA BA AS BS MA MS OTHER: _____ College Major: _____

What is your best score on either the ACT or SAT Test?

ACT	SAT	What is your High School Grade Point Average?
01 - 12: _____	No. EQUIVALENT: _____	1.00 - 1.99: _____
13 - 19: _____	No. EQUIVALENT: _____	2.00 - 2.69: _____
20 - 22: _____	840 - 1050: _____	2.70 - 3.19: _____
23 - 25: _____	1060 - 1300: _____	3.20 - 3.59: _____
26 - + : _____		3.60 - + : _____

If you did not graduate from High School, Have you passed the GED test? Yes No

TRIBAL INFORMATION

What is your Tribal Affiliation? TRIBE: _____ TRIBAL ENROLLMENT#: _____

Of which TERO REGION are you a resident? (Example: SOUTHERN PLAINS, EASTERN, SOUTHWEST, GREAT LAKES, ROCKY MOUNTAIN, ETC.)

TERO REGION: _____

WARNING

ANY PERSON WHO KNOWINGLY MAKES A FALSE STATEMENT OR MISREPRESENTATION ON THIS SCHOLARSHIP APPLICATION IS SUBJECT TO DISQUALIFICATION.

<i>Applicant's signature</i>	<i>Date</i>	
------------------------------	-------------	--

**COUNCIL FOR TRIBAL EMPLOYMENT RIGHTS
"ITCHE SHIKAAKE"
2021 SCHOLARSHIP APPLICATION**

CERTIFICATION

I DECLARE UNDER PENALTY OF PERJURY, UNDER THE LAWS OF THE UNITED STATES OF AMERICA, THAT THE FOLLOWING IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND I CONSENT TO THE RELEASE OF THIS INFORMATION TO THE NECESSARY AGENCIES TO COMPLETE MY CTER SCHOLARSHIP APPLICATION. I UNDERSTAND THAT ANY GRANT AWARDED TO ME WILL BE MAILED IN MY NAME TO THE FINANCIAL AID OFFICE AT MY SCHOOL OF ENROLLMENT. I FURTHER UNDERSTAND AND ACKNOWLEDGE THAT I WILL PROVIDE A COPY OF MY GRADES AND TRANSCRIPT TO THE CTER OFFICE AT THE END OF EACH SEMESTER.

I FURTHER CERTIFY THAT I HAVE READ AND UNDERSTAND THE CONTENT OF THIS APPLICATION PACKET.

SIGNATURE OF APPLICANT: _____

DATE: _____

SIGNATURE OF PARENT/GUARDIAN: _____
(If applicant is under age 18)

DATE: _____

FOR CTER OFFICE USE ONLY

Received By: _____

Date: _____