



Scholarship Program Application

The Delaware Tribe of Indians is pleased to offer various programs for Tribal Citizens. Funded by the Bureau of Indian Affairs's American Rescue Plan Act (ARPA) supplement, these programs are intended to provide economic relief for Delaware Tribal Citizens in response to the COVID-19 Pandemic. This application determines eligibility for the Delaware Tribe's Scholarship Program.

Delaware Scholarship Program: This program intended to provide financial assistance for Delaware Tribal members who are enrolled in higher education, ensuring that Tribal members have access to adequate funding to support their post-secondary education. The Scholarship Program is meant to provide Delaware Tribal members with financial support for affording College/University

The Delaware Tribe of Indians has set aside \$100,000 to introduce the Scholarship Program to assist Tribal members access and afford higher education. Eligible full-time applicants will receive up to \$1,000 in scholarship funding, and part-time applicants will receive \$500 in scholarship funding.

Applications will be received on a rolling basis, and approved applications will be notified until program funds are depleted.

Applicant Personal and Contact Information

Applicant Full Name			
Date of Birth		Tribal Enrollment #	
Physical Address (Street, City, Zip)			
Mailing Address (Street, City, Zip)			
Phone Number		Email Address	
Name of College/University/School		Enrollment Status	<input type="checkbox"/> Full-Time (12+ credits/semester) <input type="checkbox"/> Part-Time (<12 credits/semester)

Delaware Scholarship Program – Required Documents

Please attach the following supporting documentation associated with the program(s) you are applying for:

<input type="checkbox"/> Proof of Delaware Tribal Enrollment (Tribal ID, Certificate of Indian Blood, etc.)	<input type="checkbox"/> Proof of higher-education enrollment (letter of Acceptance and most recent official transcript, course schedule, etc.)
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Applicant Certification

I certify that all the answers given are true, complete, and correct to the best of my knowledge and belief, and they are made in good faith. This certification is made with the knowledge that the information will be used to determine eligibility to receive financial assistance, and that false or misleading statements may constitute a violation of 18 U.S.C. 1001. This application contains material covered by the Privacy Act. No record will be communicated to anyone or any agency unless requested in writing, by the applicant, or unless an officer or employee of the Tribe or other Federal agency requires it in the performance of their duties.

Printed Name:	
Signature:	Date:

How to Submit this Application

Submit by Mail:

Delaware Tribe of Indians
Attn: ARPA Department
5100 Tuxedo Boulevard
Bartlesville, OK 74006

Drop off in person:

Delaware Tribe of Indians Tribal Headquarters
5100 Tuxedo Boulevard
Bartlesville, OK 74006

For Official Use Only

Date received by the Tribe:	
Tribal enrollment verified? <input type="checkbox"/> Yes <input type="checkbox"/> No	Date Verified:
Additional Documentation:	<input type="checkbox"/> Proof of enrollment in College/University
Denied Program(s) and why:	
Approval/Denial Letter sent: <input type="checkbox"/> Yes <input type="checkbox"/> No	Date Mailed: