



JOHN PANAMARIOFF SR. SCHOLARSHIP

Vocational and Career Enhancement Application

ELIGIBILITY CATAGORIES for ALL:

Open to shareholders and descendants of Ouzinkie Native Corporation (ONC). A descendant database application is required for descendants to be eligible. Students must be enrolled in an accredited college, university, or vocational school. Students must maintain a cumulative 2.0 G.P.A. or remain in good standing if the academic or training institution does not grade courses. Students must reapply for funding for each calendar year. A copy of the Standard Operating Procedure is available upon request.

TYPES of SCHOLARSHIPS:

Funds are paid by Ouzinkie Native Corporation directly to the institution. Student must reapply for funding each calendar year. The maximum award is granted to full-time students, as defined by your college or program. Students attending less than full-time will receive a pro-rated amount.

VOCATIONAL: Up to \$5000 per calendar year will be granted to shareholders and descendants who are enrolled in long-term training for students preparing for professions that are non-academic and directly related to a trade, occupation, or vocation. Room, board, and travel (including but not limited to round trip air, ferry, or mileage reimbursement) may be covered if training is outside area of residence. Rental cars will not be covered. Verification of expenses is required.

Complete applications must be received no later than 7 days before classes begin.

CAREER ENHANCEMENT: Up to \$2,500 per calendar year will be granted to shareholders and descendants who are enrolled in short-term job ready training, non-degree programs such as licensing and certification training, workshops, or other career advancing programs. Room, board and travel (including but not limited to round trip air, ferry or mileage reimbursement) may be covered if training is outside area of residence. Rental cars will not be covered. Verification of each expense is required.

Complete applications must be received no later than 7 days before classes begin.

Complete the scholarship application and provide following documents with the application:

- Scholarship/Career Enhancement Application
- Verification of expenses is required
- Official Vocational Transcripts (if applicable)
- Enrollment Verification Letter from Your School or Institution
- Class Schedule
- Completed Shareholder/Descendant Database Form
- Proof of Certification/Course Completion
- (Optional) Photo for ONC Publishing Purposes

SEND APPLICATION AND DOCUMENTS TO:

| | |
|--|---|
| MAIL TO: | |
| Ouzinkie Native Corporation PO Box 89 Ouzinkie, AK 99644 | Ouzinkie Native Corporation 11001 O'Malley Centre Dr., Ste. 105 Anchorage, AK 99515 |
| EMAIL: ONCScholarships@Ouzinkie.com | |
| PHONE: (907) 680-2208, (800) 680-2208, (907) 561-2452 | |

To the best of my knowledge and belief, the information in this application packet is true and correct. My submission of this application does not create any funding obligations for Ouzinkie Native Corporation. If I do not register for or complete the school terms described in this application, or if I do not maintain a 2.0 G.P.A. under the program's probation policy, I acknowledge that Ouzinkie Native Corporation will discontinue funding and, as appropriate, seek reimbursement of unused monies from the institution.

*** IMPORTANT: Deadlines are fully enforced ***

A. STUDENT INFORMATION

| | | | | | |
|---|--|--|--|---|--|
| Student Name | | Last Four of SSN | | Date of Birth | |
| Home Address | | City | | State | |
| Student Address While at School | | City | | State | |
| Home Phone | | School/Work Phone | | Cell Phone | |
| Email | | Eligibility (check one): <input type="checkbox"/> Shareholder <input type="checkbox"/> Descendant | | <input type="checkbox"/> New Applicant <input type="checkbox"/> Repeat Application | |
| Name & Relationship of Relative/Shareholder: | | | | | |
| Relative of Board Member of Ouzinkie Native Corporation (check one): <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | |
| Name & Relationship of Relative serving on the Board: | | | | | |

B. APPLICATION STATUS

| | | | |
|------------------------------------|--|-------------------------------------|---|
| <input type="checkbox"/> GRADUATE | <input type="checkbox"/> UNDERGRADUATE | <input type="checkbox"/> VOCATIONAL | <input type="checkbox"/> CAREER ENHANCEMENT |
| <input type="checkbox"/> FULL TIME | <input type="checkbox"/> PART TIME | | |
| For Term(s) Beginning On: | | | |

C. PROGRAM

| | | | |
|---|---------------|--|-------------------------------|
| Name of Institution | | Phone | |
| Address | | City | |
| | | State | |
| | | Zip Code | |
| Student ID Number | Program Major | | Program Minor (if applicable) |
| Degree Sought | | Anticipated Graduation Date | |
| Terms to enroll (check all that apply) <input type="checkbox"/> Fall <input type="checkbox"/> Winter <input type="checkbox"/> Spring <input type="checkbox"/> Summer | | Institutional system (check one) <input type="checkbox"/> Semester <input type="checkbox"/> Trimester <input type="checkbox"/> Quarter <input type="checkbox"/> Other (Please Note: | |
| Dates scholarship will cover | | | |

For questions regarding the John Panamarioff Sr. Scholarship:
 Main Office Phone (907) 680-2208, Toll Free 800-680-2208, Fax (907) 680-2268, E-mail: oncscholarships@ouzinkie.com
 Anchorage Office Phone (907) 561-2452, Fax (907) 561-2453, E-mail oncscholarships@ouzinkie.com

D. EDUCATIONAL BACKGROUND

| Name and Location of High School, Colleges and Universities previously attended | Degree/Major | Dates Attended | Graduation Date |
|---|--------------|----------------|-----------------|
| | | | |
| | | | |
| | | | |

E. SOURCES OF FINANCIAL ASSISTANCE

| Estimated Expenses | | Other Financial Aid | | | |
|---|--------|---------------------|--------------|------------------|-----------------|
| Verification of all expenses listed required | Amount | Date applied | Organization | Amount Requested | Amount Received |
| Tuition | | | | | |
| Fees | | | | | |
| Dues | | | | | |
| Room/Rent | | | | | |
| Meals/Food | | | | | |
| Books/Supplies | | | | | |
| Total Expenses | | Total Financial Aid | | | |

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****** IMPORTANT: Deadlines are fully enforced ******

Applicant/Student’s Signature: _____ Date: _____

I give permission for my name, grades, and award information to be published in Ouzinkie Native Corporation newsletter and online by Ouzinkie Native Corporation or Ouzinkie Native Corporation for the purpose of discussing the scholarship and grant program.

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