



# **NATIVES OF KODIAK**

## **CECIL SHOLL MEMORIAL SCHOLARSHIP**

*DOOR TO THE FUTURE*

**PROCEDURES AND APPLICATION**

## **Natives of Kodiak, Inc. Scholarship Fund Cecil Sholl Memorial Scholarship**

### **Scholarship Administration and Goals**

Natives of Kodiak, Inc. (NOK) is administering the Cecil Sholl Memorial Scholarship for the 2012/13 academic year. This funding is made available through the Natives of Kodiak, Inc. Scholarship Fund. The Cecil Sholl Memorial Scholarship Program is designed to recognize and provide financial support to students of demonstrated ability who are seeking higher education.

### **Eligibility**

Applicants must be:

- shareholders, direct lineal descendants of a shareholder, or legally adopted children of a shareholder
- currently accepted by or enrolled in a nationally accredited university or vocational school
- attending as full time students, as defined by the relevant educational institution

### **Scholarship Types, Review Process and Scoring System**

#### **Scholarship Types:**

1. Academic Achievement, High School
2. Academic Achievement, College
3. Vocational, Special Fields, Discretionary

#### **Review Process:**

The Scholarship Committee is comprised of five members: two NOK Directors and three NOK shareholders or descendants of shareholders, appointed by the NOK Board of Directors and selected based on their knowledge and interest in the educational development of Alaska Natives.

**Scoring System:** Applications are scored in the following eight categories, each worth 10 points, for a total of 80 points. Those with the highest combined scores will be awarded the greatest amounts.

- Achievements, Activities, and Responsibilities
- Educational Goals
- Essay
- Financial Need
- Grade Point Average
- Leadership Abilities
- Letters of Recommendation
- Neatness & Grammar

### **Scholarship Availability**

- 5** Cecil Sholl Memorial Scholarships in the amount of \$2,500 each
- 10** Cecil Sholl Memorial Scholarships in the amount of \$2,000 each
- 5** Cecil Sholl Memorial Scholarships in the amount of \$1,000 each

### **Disbursement of Funds**

Scholarship funds shall be disbursed by NOK through the recipient's school and must be used to offset bona fide fees and tuition expenses. Any funds not used by the recipient will be returned to NOK. Checks will be issued two weeks prior to the beginning of the academic period and will be made out to the appropriate financial aid office.

**Natives of Kodiak, Inc.  
Cecil Sholl Memorial Scholarship  
Application Checklist**

Please complete each section of the application. Ensure that all attachments, identified by a , are enclosed with the application.

**I. Eligibility**

**Applicant's Birth Certificate**

**II. Personal Information**

**III. Educational Institution & Personal Academic Information**

**Acceptance Letter / Proof of Attendance**

**Official Transcript**

*Submit the most current transcript. The latest unofficial transcript is temporarily acceptable, but money will only be disbursed upon receipt of an official transcript.*

**IV. Achievements**

**V. Employment History**

**Résumé**

**VI. Budget**

**Academic Institution's Student Expense Sheet**

**VII. Essay**

**Essay and Photo**

**VIII. Recommendations**

**Two (2) Signed Letters of Recommendation**

**IX. Applicant Signature**

**POSTMARKED BY APRIL 20, 2012  
SCHOLARSHIP COMMITTEE Natives of Kodiak, Inc.  
215 Mission Road, Suite 201  
Kodiak, Alaska 99615**

**Natives of Kodiak, Inc.**  
**Cecil Sholl Memorial Scholarship Application**

***Directions: Please answer all questions. If you believe a question does not apply to you, please put NA (Not Applicable) in the available space. Applications with blank lines will not be considered.***

**I. ELIGIBILITY**

Name:

First \_\_\_\_\_ MI \_\_\_\_\_ Last \_\_\_\_\_

Are you a voting NOK shareholder?  Yes  No

If yes, provide your shareholder ID Number: \_\_\_\_\_

If not, please provide the name of your *direct lineal relative* who is a voting NOK Shareholder:  
*A lineal relative is a parent, grandparent or great-grandparent. Legally adopted children of voting shareholders are eligible.*

\_\_\_\_\_

Your relationship to the voting NOK Shareholder: \_\_\_\_\_

-----

The Voting NOK Shareholder's Information

Shareholder ID #: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

\_\_\_\_\_  
P.O. Box/ Street Address

\_\_\_\_\_  
City State Zip Code

***Applicant must include a copy of his/her birth certificate for identification purposes***

**II. PERSONAL INFORMATION**

Name:

First \_\_\_\_\_ MI \_\_\_\_\_ Last \_\_\_\_\_

Gender:  Male  Female

Are you an Alaskan resident?  Yes  No

DOB: \_\_\_\_\_

Place of Birth: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

**Permanent Address:**

\_\_\_\_\_  
P.O. Box / Street Address

\_\_\_\_\_  
City State Zip Code

(\_\_\_\_\_) \_\_\_\_\_

Phone Number

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

**Address While in School:**

\_\_\_\_\_  
P.O. Box / Street Address

\_\_\_\_\_  
City State Zip Code

(\_\_\_\_\_) \_\_\_\_\_

Phone Number

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



**IV. ACHIEVEMENTS** *Please list achievements on this page. No separate attachments please.*

**Academic**

Degrees or certificates currently held:

	Degree	University / Institution name	City, State	Dates Attended
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____

Please list academic honors, achievements or awards

**Extracurricular**

Please list volunteer, sports, or extracurricular activities or achievements

**V. EMPLOYMENT HISTORY**

*Please attach your most recent résumé, including employers' names, addresses, employment dates, job titles and descriptions.*

**VI. BUDGET**

*Please include a copy of the academic institution's student expense sheet.*

**Expenses**

	<b>Amount</b>
Tuition and Fees	\$ _____
Room and Board	_____
Textbooks and Supplies	_____
Transportation	_____
Personal Expenses (please itemize)	

Personal Expenses total \_\_\_\_\_

TOTAL EXPENSES: \_\_\_\_\_

**Resources**

Personal Contribution	\$ _____
Parental Contribution	_____
Veteran's Administration Aid	_____
State / Federal Social Security	_____
Other Governmental Aid	_____
Scholarships / Fellowships	_____
BIA Scholarships	_____
Other	_____

TOTAL RESOURCES: \$ \_\_\_\_\_

RESOURCES – EXPENSES = TOTAL UNMET NEED: \$ \_\_\_\_\_

**VII. ESSAY**

*Please respond in an attached, typed essay to the following prompt:*

**Please discuss your educational goals and  
how your education will benefit the Alutiiq community.**

*Essays should be between 400 - 600 words in Times New Roman 12 point font. Please attach a photo of yourself to your essay.*

**VIII. RECOMMENDATIONS**

Please include two original letters of recommendation from people who can address your academic potential, educational goals, work ethic and character. Letters should be signed and dated within the past six months. Please do not include letters from relatives.

**IX. APPLICANT SIGNATURE**

I hereby certify that the information provided in this application is true and correct.

I have been accepted to and will attend the identified academic institution full time.

All Natives of Kodiak, Inc. funds disbursed to me will be used for the educational expenses itemized in this application. I understand that if I violate this pledge, I may be required to reimburse Natives of Kodiak, Inc., in full or part for funds disbursed to me.

I understand that I must maintain a GPA of 2.0 or better to continue eligibility and mail official transcripts to this office at the end of each academic period (quarter, semester, or vocational session).

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Applicant's Printed Name

\_\_\_\_\_  
Date

