GREASEWOOD SPRINGS CHAPTER
CHAPTER COLLEGE STUDENT SCHOLARSHIP

Student Name: _____ **Date:** _____

Semester: Fall _____ Spring _____ Summer _____

The Chapter Student Scholarship Program assists students pursuing a degree in one of the following
(Please Circle One):

_____ **Associates of Art Degree**
_____ **Associates of Applied Science**
_____ **Masters Degree**
_____ **Doctorate Degree**
_____ **Associates of Science Degree**
_____ **Bachelors Degree**
_____ **Vocational Certificate/Degree**
_____ **General Education Diploma**

PLEASE ATTACH THE FOLLOWING DOCUMENTS:

1. **CHAPTER STUDENT SCHOLARSHIP APPLICATION** Yes: _____ No: _____

2. **NAVAJO NATION VOTER REGISTRATION RECEIPT:** Yes: _____ No: _____
(Proof of registration with Greasewood Springs Chapter. If under the age of 18, need proof of parents voter registration). Yes: _____ No: _____

3. **VERIFICATION OF ENROLLMENT:** Yes: _____ No: _____

~Student must be accepted from a college/university or vocational school.
College/University/Vocational School Name: _____
Full-Time: _____ **Part-Time:** _____

~Graduate Student please submit two (2) letters of admissions
from the graduate college/university: Yes: _____ No: _____
the other from the academic department:
(Letters must state Degree Program of Student) Yes: _____ No: _____

4. **OFFICIAL TRANSCRIPT**: *(For previous semesters)* Yes: _____ No: _____
Grade Point Average above a 2.5? Yes: _____ No: _____ **what is GPA?** _____
First time College Student? Yes: _____ No: _____

5. **LETTER OF REQUEST FOR CHAPTER STUDENT SCHOLARSHIP:**
**** REQUIRED** Yes: _____ No: _____

Office Use Only:
Approved: _____ Denied: _____
Concurred:

_____ _____
Chapter Official/Administration: Date: Chapter President: Date: