

NIMA CORPORATION SCHOLARSHIP FUND

**NIMA CORPORATION
236 WEST 10TH AVE., SUITE 100
ANCHORAGE, ALASKA 99501**

907-561-2066 – PHONE FAX – 907-563-1567

Application for _____ Semester/Quarter 20__ Today's Date _____

DEADLINE FOR APPLICATION IS 45 DAYS PRIOR TO START OF SEMESTER/QUARTER; AN APPLICATION IS NEEDED FOR EACH SEMESTER/QUARTER

Initial Application: Yes ___ No ___

For Renewal, please submit final grades to the NIMA Corporation Office. To be eligible for renewal undergraduate and voc-ed students must have a 2.0 GPA, graduate students a 3.0 GPA.

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APPLICATION CHECKLIST

- _____ Application, including:
 - _____ Financial Statement
 - _____ Budget Statement from Financial Aid Office (From College / Institution)
 - _____ Enrollment Certification from Admissions Office (From College / Institution)
 - _____ Recent High School and / or College Transcript(s)

Please do not rely solely on the NIMA Corporation Scholarship Fund to fund future educational needs

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PERSONAL INFORMATION

Name _____

Permanent Address _____

Mailing Address (if different from above) _____

Physical address while attending School _____

Home Phone No. (____) _____ School Phone No. (____) _____

Year Graduated from High School _____ GED: Y/N _____ Year: _____

Name and Address of High School Attended _____

Grade Point Average upon High School Graduation (attach transcript) _____

NIMA Corporation Shareholder Number of Applicant or Applicant's Name & Enrollment of Parent

Mailing Address of Parents _____

Parents' Contact Phone No. (____) _____

SCHOOL INFORMATION

Post Secondary School Previously Completed (if any)

Vocational Training Institution (name/address)

Course of Study _____ Grade Point Average _____
Certification/Degree Awarded _____ Year Awarded _____

PLEASE PROVIDE A COPY OF YOUR TRANSCRIPT

Undergraduate University (name/address)

Major _____ Minor _____ Year(s) Completed _____
Date of Degree _____ Grade Point Average _____

PLEASE PROVIDE A COPY OF YOUR TRANSCRIPT

Graduate University (name/address)

Major _____ Minor _____ Year(s) Completed _____
Date of Degree _____ Grade Point Average _____

Current Post Secondary Enrollment

NOTE: YOU MUST ATTACH ENROLLMENT CERTIFICATION FROM YOUR SCHOOL

A. Two (2) year college: _____ First (1st) Year _____ Second (2nd) Year

Name of College: _____

Address of College: _____

School Admissions Office Phone Number: _____

Date of Enrollment: _____

Course of Study: _____ Major _____ Minor

Current Grade Point Average (if any) _____

PLEASE PROVIDE A COPY OF YOUR TRANSCRIPT if any courses completed

B. Four (4) year college: ___ First (1st) Year ___ Second (2nd) Year ___ Third (3rd) ___ Fourth (4th) Year

Name of College: _____

Address of College: _____

School Admissions Office Phone Number: (____) _____

Date of Enrollment: _____

Course of Study: _____ Major _____ Minor

Current Grade Point Average (if any) _____

PLEASE PROVIDE A COPY OF YOUR TRANSCRIPT if any courses completed

C. Vocational Training: Year ___ First (1st) Year ___ Second (2nd) Year ___ Third (3rd)

Name of Institution: _____

Address of Institution: _____

Institution Admissions Office Phone Number: _____

Date of Enrollment: _____

Course of Study: _____ Major _____ Minor

Current Grade Point Average (if any) _____ if any courses completed

PLEASE PROVIDE A COPY OF YOUR TRANSCRIPT

List and identify the courses to be taken during the current award request period:

<i>Course Title(s)</i>	<i>Required</i>	<i>Elective</i>	<i>Credit(s)</i>

FINANCIAL INFORMATION

List other scholarships or loans you have applied for or have been awarded:

Scholarship/loan	Amount	Date Received

Estimated Income for Application Period (mark all that apply for current school year)

Fall _____ **Winter** _____ **Spring (if quarter system)** _____ **Summer** _____

Applicant's Income/Earnings	\$ _____	Yearly
Parents' Contribution	\$ _____	Yearly
Spouse's Contribution	\$ _____	Yearly
Applicant's Savings & Investments	\$ _____	
Applicant's Net Worth	\$ _____	
Other (Please Specify Sources)	\$ _____	Yearly
Subtotal	\$ _____	Yearly
Loans/Grants from Tribal, State, Federal or School Programs (Please Specify Source)		
_____	\$ _____	Yearly/Semester-Quarter
_____	\$ _____	Yearly/Semester-Quarter
_____	\$ _____	Yearly/Semester-Quarter
Total Resources	\$ _____	Yearly/Semester-Quarter

Anticipated Expenses for Application Period

NOTE: YOU MUST ATTACH BUDGET STATEMENT FROM FINANCIAL AID OFFICE OF SCHOOL

Tuition	\$ _____	Yearly
Fees (Lab, Activity)	\$ _____	Yearly
Books and Supplies	\$ _____	Yearly
Dormitory / Housing	\$ _____	Yearly
Meal Ticket / Grocery	\$ _____	Yearly
Travel to / from Campus	\$ _____	Yearly
Other (Please Specify)	\$ _____	Yearly
_____	\$ _____	Yearly
_____	\$ _____	Yearly
_____	\$ _____	Yearly
Total Expenses	\$ _____	Yearly/Semester-Quarter

Amount of Scholarship Request \$ _____ **Semester-Quarter**

STATEMENT OF HONESTY

I certify the information in this application and in any attachments or supporting documents are true and completed to the best of my knowledge. I understand any falsification, misrepresentation, or omission, as well as any misleading statements may void this application and I may be declared ineligible for financial assistance from the NIMA Corporation Scholarship Fund.

Signature _____ Date _____