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Ponca Tribe of Nebraska  
Department of Education

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1800 Syracuse Avenue  
Norfolk, NE 68701

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402-371-8834  
FAX: 402-371-7564

3/16/2024

Dear Tribal Member:

This is to inform you of a new scholarship that is now available to our members nationwide. This scholarship was made possible by a private donor who wishes to remain anonymous. Currently, the amount of the scholarship is \$1,000.00; and the student must demonstrate "need." Also, depending on the student's "need," this scholarship may be awarded in conjunction with tribal assistance or independent of tribal assistance.

**The deadline to submit for consideration of this scholarship is August 15, 2024.** All applications must be completed and received by this date. Names will then be entered in a drawing. And once the name of the winner is known, he or she will be notified immediately.

Attached are the guidelines and relevant forms that need to be completed. Please review the materials, and if you have any questions, please contact Aubrey or me.

Sincerely,

**Pat Eichberger**

Pat Eichberger  
Director of Education

Enclosure: Guidelines, Application, Contract, Financial Need Form

## BUILDING FOR THE FUTURE

### *Guidelines*

#### **Purpose:**

These funds are to be awarded to a Ponca student who demonstrates need with his/her career development.

#### **Selection:**

- All eligible students will be identified.
- On August 15<sup>th</sup> of the relevant school year, a drawing will be held; and
- The student whose name is drawn will be awarded the scholarship.

#### **Provisions:**

- The student must have his/her paperwork complete by the August 15<sup>th</sup> deadline:
- If awarded, funds will go directly to the school and will be applied to the student's "unmet need."

#### **Eligibility**

- The student must be enrolled in some type an Adult Vocational Training Program or working toward a bachelor's degree.
- The student must provide proof of enrollment in the Ponca Tribe of Nebraska
- The student must provide proof of graduation from high school or completion of his/her GED.
- The student must complete and submit the following forms:
  - Application;
  - Contract; and
  - Financial Need Form

#### **Requirements:**

- The student must maintain satisfactory academic progress with an accumulative GPA of 2.5 or better for the term funded.
- If the student does not maintain the required 2.5 GPA, he/she must refund the scholarship.
- The student must also submit an official transcript to the Ponca Tribe of Nebraska Department of Education for the term funded.

**BUILDING FOR THE FUTURE**  
Application

**Student Information**

Name:

Address:

City:

State:

ZIP Code:

Phone:

Cell Phone:

Email Address:

Date of Birth:

SS#:

Tribal ID#:

**Please answer the following questions**

Name of college/trade school you plan to attend:

Program of Study:

Cost of Program:

Cost for which the scholarship will be used:

Term for which funds are being requested (Circle one: Fall 2024/Spring 2025)

**Please include the following attachments**

Proof of enrollment in the Ponca Tribe of Nebraska

Proof of completion of either high school or GED

A completed Financial Need Form

Signed contract

**Signature**

Signature:

Date:

**BUILDING FOR THE FUTURE**  
*Contract of Understanding*

I, \_\_\_\_\_, will use this scholarship to assist me with  
Please print full name

my career development. I also understand that I am to maintain satisfactory progress with a cumulative GPA of 2.5 or better and will provide the Ponca Tribe of Nebraska Department of Education with a transcript after completion of each term for which the scholarship is to be used. If I do not maintain satisfactory progress, I will reimburse the funds that I received.

\_\_\_\_\_  
Scholarship Recipient

\_\_\_\_\_  
Date

Note: This scholarship was gifted to the Ponca Tribe of Nebraska by a donor who wishes to remain anonymous and whose main request is that the award be used in its entirety to assist a need-based student with his/her career development needs.

**BUILDING FOR THE FUTURE**  
*Financial Need Form*

**I. TO BE COMPLETED BY THE STUDENT:**

NAME \_\_\_\_\_ STUDENT SCHOOL ID# \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_

CITY/STATE/ZIP \_\_\_\_\_ TRIBAL ENROLLMENT NO. \_\_\_\_\_

YEAR IN COLLEGE \_\_\_\_\_ MAJOR \_\_\_\_\_ MINOR \_\_\_\_\_ CREDIT HRS COMPLETED \_\_\_\_\_

**Please note:** All undergraduate students are required to complete and process the Free Application for Federal Student Aid (FAFSA) before eligibility for this scholarship can be determined. The appropriate college/university is then to complete Part II of this form based on the results of the FAFSA and forward to:

**PONCA TRIBE OF NEBRASKA**  
**ATTN: DEPARTMENT OF EDUCATION**  
**1800 SYRACUSE AVENUE**  
**NORFOLK, NE 68701**  
**TELEPHONE: (402) 371-8834/FAX: (402) 371-7564**  
**EMAIL: [pate@poncatrib-ne.gov](mailto:pate@poncatrib-ne.gov) or [aknudsen@poncatrib-ne.gov](mailto:aknudsen@poncatrib-ne.gov)**

I, hereby, grant permission for all information on this form to be submitted to the above addressee.

Signature of Student \_\_\_\_\_ Date \_\_\_\_\_

**II. TO BE COMPLETED BY THE FINANCIAL AID OFFICER:**

This student has applied for the Building for the Future Scholarship. Verified financial need information is required by the Selection Committee before any action can be taken on this application. For the undergraduate student, please complete and forward this form or a like form to the above addressee. Thank you for your assistance.

Budget Period: From \_\_\_\_\_ to \_\_\_\_\_ which starts on \_\_\_\_\_  
month/year month/year date

This student is considered: Independent \_\_\_ Dependent \_\_\_ Assessed Need . . . . . \$ \_\_\_\_\_

Parental Contribution	_____	PELL Grant	_____	Tuition	_____
Student Contribution	_____	Work Study	_____	Books	_____
Spouse Contribution	_____	SEOG	_____	Fees	_____
VA Benefits	_____	Grant - State/Other	_____	Room	_____
Soc. Sec. Benefits	_____	Scholarship	_____	Board	_____
Welfare Benefits	_____	Direct Loan	_____	Travel	_____
Voc Rehab	_____	Unsub Loan	_____	Misc.	_____
Workforce Dev	_____	Waivers/Other	_____	Total	_____
Total	_____	Total	_____		

We recommend that the above, named student be awarded the following amount . . . . . \_\_\_\_\_

Signature \_\_\_\_\_

Financial Aid Officer\*

Date

Telephone Number

Name of College

Address

ZIP Code

\*My signature verifies that the above, named student has been accepted by our college for the period indicated.

Type of terms implemented by your college/university: Semesters Quarters Trimesters Other: \_\_\_\_\_

Tuition and fee costs are based on: 12 credit hours per term 15 credit hours per term Other: \_\_\_\_\_