



2019 Dr. Kenneth F. Gose Scholarship Application

Thank you for your interest in the Dr. Kenneth F. Gose Scholarship. Each year, this scholarship has generously contributed to three (3) seniors in the amount of \$1,600 each, to be used for tuition, books, and/or housing. Each applicant must satisfy the following criteria to be considered for the award:

- Attend an AdvancED Navajo Nation accredited high school
- Plan on pursuing post-secondary education (two or four year college or university)
- Maintain a 2.5 GPA or higher
- Demonstrate a proven record of academic achievement, extracurricular activities, community service, scholastic honors/awards throughout high school
- Be an enrolled member of the Navajo Nation

This application packet must be submitted along with all required documents to the AdvancED Navajo Nation Office by April 26, 2019 @ 5pm. Submissions can also be postmarked by the same date and time.

The applicant is responsible for ensuring that all supporting documents are complete upon submission. The Scholarship Committee reserves the right to process only those applications found to be complete as of the application postmarked deadline.

Place the completed application packet in an 8 ½" x 11" envelope, do not bind or staple, and submit to: Navajo Education Center, 2nd floor, Suite 211, Window Rock, Arizona; or mail to:

AdvancED Navajo Nation
ATTN: Dr. KFG SCHOLARSHIP COMMITTEE
P. O. Box 4740
Window Rock, Arizona 86515



If chosen as a recipient for the Dr. Kenneth F. Gose Scholarship, student must work cooperatively with AdvancED staff in providing additional information as needed (e.g. proof of enrollment, college course schedule, student I.D., financial need analysis, etc.). **Scholarship check will not be issued to student's institution until all three (3) finalists have provided all required information.**

Scholarship checks will be made payable to the institution and will be distributed according to the policies and procedures of the institution and its financial aid office.

REQUIRED DOCUMENTS

Please submit the following in order to be considered for this award:

- Certification and Release Form
 - Application with attached short essays
 - Letter of acceptance, if applicable
 - School Guidance Counselor Form*
 - Letters of recommendation (3 total)
 - Professional Letters of Recommendation: Two (2) letters* must come from school staff members (e.g. teacher, coach, principal, etc. No Guidance Counselors)
 - Personal Letter of Recommendation: One (1) letter* must come from a non-school employee who knows the applicant well (e.g. minister, job supervisor, community leader, etc.)
- *Letters of recommendation must be in a sealed and signed envelope. These sealed envelopes should be submitted with your application packet. Your application will not be considered completed unless all letters are submitted.*
- Parent or Guardian Certification Form
 - High School Transcripts of previous 7 semesters, verifying a 2.5 GPA or higher
 - Official Certificate of Indian Blood (CIB)

CERTIFICATION & RELEASE FORM

Certification

I understand that this application becomes valid ONLY when the AdvancED Navajo Nation office receives all the required documents by **April 26, 2019 @5pm**. Further, I understand that if my application is incomplete, it will not be considered for the award.

In submitting this application, I certify that the information provided is complete and accurate to the best of my knowledge. Falsification of information may result in termination of any funds offered.

Permission to use Applicant Information to Announce Recipients

If I am offered the scholarship and accept the award from AdvancED Navajo Nation, I agree that the following information may be used by participating members of the Dr. Kenneth F. Gose Scholarship Committee, any of its affiliates or partnering organizations, in press releases, public announcements, and other fundraising or promotional materials in all media, to advance the non-profit objective of AdvancED, its affiliates and partnering organizations:

- My name
- My Photograph
- My community
- The name and address of my school
- The amount of the award

Applicant's Name Printed: _____

Applicant's Signature: _____ Date: _____

If applicant is under 18 years old:

Parent/Guardian's Name Printed: _____

Parent/Guardian's Signature: _____ Date: _____



APPLICATION

Please type or print the following information as completely as possible:

1. Applicant's Name: _____
First *Middle* *Last*

Mailing Address: _____
PO Box, Route *City, State* *Zip Code*

Date of Birth: ____/____/____ Age: ____ Cell Number: (____)____-____

Email: _____ Message Phone: _____

Are you a First Generation College Student? Yes No

High School: _____

High School Address: _____

2. Parent/Guardian Information:

<i>Mother/Guardian Name</i>	<i>Father/Guardian Name</i>
<i>Address</i>	<i>Address</i>
<i>City, State, Zip Code</i>	<i>City, State, Zip Code</i>
<i>Occupation</i>	<i>Occupation</i>
<i>Email</i>	<i>Email</i>
<i>Phone</i>	<i>Phone</i>

3. Have you been accepted into a College or University? Yes* No

If yes*, please list: _____
College / University *City, State*

Intended Major: _____

*If you have been accepted to the abovementioned institution, please submit a copy of your official Acceptance Letter.



4. Other schools that I am considering:

<hr/>	<hr/>
<i>College / University</i>	<i>City, State</i>
<hr/>	<hr/>
<i>College / University</i>	<i>City, State</i>
<hr/>	<hr/>
<i>College / University</i>	<i>City, State</i>

5. List **school** sponsored clubs/organizations of which you are/were a member; include offices held and school year if applicable:

6. List all High School academic awards and honors you have received.

7. List extracurricular activities you are involved in, including but not limited to sports teams, clubs, organizations not listed above, etc.

8. List all community services opportunities you are involved in (outside of school).



9. Short essays. On a separate sheet, answer EACH of the following questions in no more than 250 words each.

- Explain why you want to attend college. What are your goals during and after completing your college/university program?
- Many students face adversity and challenges during their journey towards higher education. What are some challenges you have faced? What have you learned about yourself?
- What would this scholarship mean to your personal goals?

Guidance Counselor Form

Applicant: Fill out section A and give this form to your School Guidance Counselor. They will fill out section B and return to you. This form is required to be submitted with your application.

Section A- By Applicant

Applicant Name: _____ Birthdate: _____

Applicant Mailing Address: _____

Name of School: _____

Section B – By Counselor

Thank you for taking the time to complete this form on behalf of your student. Please complete the following questions to the best of your ability. This form is confidential and will not be shared with the applicant. To ensure confidentiality, place this form in a sealed envelope, sign the back, and return to the applicant to submit.

****Deadline for the application is 4/26/2019 @5pm****

1. How would you characterize this applicant?

2. Is this applicant in Good Standing with all School Expectations? Yes No

Please explain your answer:

3. Are there any challenges issues that this student has faced? Please explain.



4. Date of Expected High School Graduation: _____

5. GPA (most recent, or as of December 2018): _____

6. If there is anything else you would like to share about this applicant, please submit your thoughts in a letter and attach to this form. Thank you!

Signature

Date

Letters of RECOMMENDATION

Applicant: Fill out section A and give this form to the person who will be filling out your recommendation. They will fill out section B and write a letter on your behalf. They will return both to you. This form is required to be submitted with your application.

You must submit three (3) letters of recommendation total.

- Two (2) of these letters must come from school staff members (e.g. teacher, coach, and/or principal). **Please no Guidance Counselors.**
- One (1) letter must come from an individual who knows the applicant well (e.g., minister, job supervisor, community leader, etc.).
- You are responsible for ensuring that each recommendation is given to the appropriate individual.

Letters of recommendation must be submitted in a signed and sealed envelope.

Section A- By Applicant

Applicant Name: _____ Birthdate: _____

Applicant Mailing Address: _____

Name of School: _____

Section B – To be done by Recommender

Thank you for taking the time to complete this recommendation on behalf of your student. Please complete the following questions to the best of your ability. Attach official letter of recommendation to this form.

This form is confidential and will not be shared with the applicant.

To ensure confidentiality, place this form and letter in a sealed envelope, sign the back, and return to the applicant to submit.

****Deadline for the application is 4/26/2019 @5pm****



1. Person Completing Form (Print Name): _____

2. I am submitting this recommendation as:

Professional Recommendation (Teacher, Coach, Principal, etc.)

▪ Title: _____

Personal Recommendation (Minister, Job supervisor, community leader, etc. No Relatives)

▪ Title: _____

3. Relationship to Applicant: _____

Phone: _____

E-mail: _____

DIRECTIONS: Read each statement and circle the response that represents a realistic assessment of the applicant. (**5** is considered **EXCEPTIONAL**; **3** is considered **AVERAGE**; **1** is considered **BELOW AVERAGE**)

	<i>BELOW AVG.</i>		<i>AVERAGE</i>		<i>EXCEPTIONAL</i>				
a. This student excels. He/she does more than the required.	1		2		3		4		5
b. This student demonstrates the ability to adhere to timelines and follows through.	1		2		3		4		5
c. This student demonstrates curiosity and initiative in their work.	1		2		3		4		5
d. This student demonstrates ethical standards and shows integrity.	1		2		3		4		5
e. This student demonstrates critical thinking skills in their approach to work.	1		2		3		4		5
f. This student demonstrates leadership qualities and the ability to work as a team member.	1		2		3		4		5
g. This student communicates well.	1		2		3		4		5



4. Some students face additional challenges in earning their high school diploma. Are there any special circumstances in regard to this student of which you would like to make us aware? Please use your letter for additional information if needed.

COMMENTS:

Signature

Date

Letters of RECOMMENDATION

Applicant: Fill out section A and give this form to the person who will be filling out your recommendation. They will fill out section B and write a letter on your behalf. They will return both to you. This form is required to be submitted with your application.

You must submit three (3) letters of recommendation total.

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- One (1) letter must come from an individual who knows the applicant well (e.g., minister, job supervisor, community leader, etc.).
- You are responsible for ensuring that each recommendation is given to the appropriate individual.

Letters of recommendation must be submitted in a signed and sealed envelope.

Section A- By Applicant

Applicant Name: _____ Birthdate: _____

Applicant Mailing Address: _____

Name of School: _____

Section B – To be done by Recommender

Thank you for taking the time to complete this recommendation on behalf of your student. Please complete the following questions to the best of your ability. Attach official letter of recommendation to this form.

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COMMENTS:

Signature

Date

Letters of RECOMMENDATION

Applicant: Fill out section A and give this form to the person who will be filling out your recommendation. They will fill out section B and write a letter on your behalf. They will return both to you. This form is required to be submitted with your application.

You must submit three (3) letters of recommendation total.

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Letters of recommendation must be submitted in a signed and sealed envelope.

Section A- By Applicant

Applicant Name: _____ Birthdate: _____

Applicant Mailing Address: _____

Name of School: _____

Section B – To be done by Recommender

Thank you for taking the time to complete this recommendation on behalf of your student. Please complete the following questions to the best of your ability. Attach official letter of recommendation to this form.

This form is confidential and will not be shared with the applicant.

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4. Some students face additional challenges in earning their high school diploma. Are there any special circumstances in regard to this student of which you would like to make us aware? Please use your letter for additional information if needed.

COMMENTS:

Signature

Date

Parent/Guardian Certification

To Applicant: Please ensure your parents/guardians fill out this form and sign the bottom. Include in your final application.

Dear Parents/Guardians,

Please ensure you have read this application thoroughly to ensure that the information provided is correct.

Initial the following statements to indicate that you understand and agree. Sign the bottom to certify this application.

- _____ I believe that my child is intent on completing a program of continuing education at a college or university.
- _____ I understand that this scholarship is supplemental and that it is our family's responsibility to finance my child's education with the help of supplemental scholarship grants.
- _____ I understand that no funds will be released until the three (3) Finalists for this Scholarship have submitted all required documentation or documentation that is requested by the AdvancED Navajo Nation Office.
- _____ I understand that only complete packets will be accepted for review by the committee.
- _____ I understand that all application packets are due on April 26, 2019 by 5pm to the AdvancED Navajo Nation Office or to be postmarked by the same date.

Please share any additional comments here:

PRINT – Parent/Guardian Name

SIGNATURE – Parent/Guardian

Date

