

# LRBOI Higher Education Scholarship Application

Little River Band of Ottawa Indians, 2608 Government Center Drive, Manistee MI 49660  
educationapps@lrboi-nsn.gov

**Students: Send both pages of this application together to the college financial Aid office**



Student Name: Last, First, Middle Initial

Address

City/State/Zip Code

Date of Birth

Email

College or University ID

Tribal ID

Tribe

College or University Name

College Address

City/State/Zip Code

College Major

Expected Degree

Expected Graduation  
Date

Status      Freshman  
                 Sophomore  
                 Junior  
                 Senior  
                 Graduate

Current Academic Year

**Statement of Privacy:** I declare the information given by me on this form is true and complete to the best of my knowledge. I understand that this information is necessary for determining my eligibility for Tribal Higher Education funding. I agree that financial aid information may be shared by the Little River Band of Ottawa Indians, the State of Michigan, and all Colleges involved. I request the financial aid office to notify the tribe of my financial need. If granted assistance, I will use it only for my approved educational expenses. I understand that I must maintain a cumulative 2.0 GPA to maintain funding.

Applicant Signature

Date

**STUDENT NEED ANALYSIS** (to be completed by financial aid officer)

Student Name \_\_\_\_\_

- Status
- Independent
  - Dependent
  - New Applicant
  - Renewal Applicant
  - Probation
  - Suspension
  - Default

**Educational Budget :**

**Anticipated Student Resources:**

Tuition \$ \_\_\_\_\_  
 Fees \$ \_\_\_\_\_  
 Books/Supplies \$ \_\_\_\_\_  
 Room/Board \$ \_\_\_\_\_  
 Personal Expenses \$ \_\_\_\_\_  
 Other (list) \$ \_\_\_\_\_

SAI \$ \_\_\_\_\_  
 VA Benefits \$ \_\_\_\_\_  
 Total Resources \$ \_\_\_\_\_  
 Financial Need \$ \_\_\_\_\_

**Total Budget** \$ \_\_\_\_\_

Assessed Need (Budget less Resources)

We have made the following awards:

	Fall	Winter/Spring
Vocational Rehab	\$ _____	\$ _____
Pell Grant	\$ _____	\$ _____
SEOG	\$ _____	\$ _____
Michigan Indian Tuition Waiver	\$ _____	\$ _____
College Work Study	\$ _____	\$ _____
Unsubsidized Loan	\$ _____	\$ _____
Subsidized Loan	\$ _____	\$ _____
Other: _____	\$ _____	\$ _____

**Total Aid:** \$ \_\_\_\_\_

**Unmet Financial Need** \$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

Please return application to: LRBOI Education Department, 2608 Government Center Drive, Manistee MI 49660 or EducationApps@lrboi-nsn.gov.

FAO Address and Phone \_\_\_\_\_

FAO official signature \_\_\_\_\_

Date \_\_\_\_\_

