



Continuing  
**CACHE**  
 Formerly SPANS

Combined  
 Application for  
 College &  
 Higher  
 Education

APPLICATION IS DUE BY THE DEADLINE INDICATED BY EACH ORGANIZATION. OFFICIAL TRANSCRIPTS AND CLASS ENROLLMENT ARE TO BE SENT IN AS SOON AS AVAILABLE TO THE PROPER SCHOLARSHIP ORGANIZATION. **CONTINUING STUDENTS** ARE DEFINED AS THOSE THAT RECEIVED A SCHOLARSHIP FOR THE PREVIOUS TERM AND HAVE MAINTAINED THE GPA AND CREDIT REQUIREMENTS FOR THE PREVIOUS TERM AND THE OTHER REQUIREMENTS STATED BY EACH ORGANIZATION.

	BSF	Sitnasuak	Kawerak	NSEDC	NSHC
<b>Required Documents</b>					
Application, pages 2 & 3	Yes	Yes	Yes	Yes	Yes
Official Transcripts	Yes	Yes	Yes	Yes	Yes
Class Enrollment	Yes	Yes	Yes	Yes	Yes
<b>Eligibility Requirements</b>					
Full-time Student (12 semester credits, 10 quarter credits, or 9 graduate credits)	Yes	Yes	Yes	Yes	Yes
Part-time Student (6-11 credits)	Yes	Yes	Yes	Yes	No
<b>Terms Funded &amp; Deadlines</b>					
Fall Term Deadline	June 30	June 30	July 15	June 30	June 30
Spring Term Deadline	December 31	December 31	December 31	December 31	December 31
Vocational Training Deadline	2 week prior to start of class	Same as Fall & Spring	No Deadline	No Deadline	Same as Fall & Spring
Summer Term Deadline	April 15	No	Contact Kawerak	Contact NSEDC	No
<b>GPA Requirements</b>					
GPA minimum requirements for college or vocational training	2.0 for first semester; 2.5 for other semesters	2.0	2.0	2.0	2.5



Sitnasuak  
 Foundation



Bering Straits Foundation



**1. PERSONAL INFORMATION (Please provide the following, not all information is used by each agency.)**

Applicant Name (First, Middle & Last)		Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth	Social Security #
Your Mailing Address While Attending School (if not known at this time please provide address ASAP)		Home/Permanent Mailing Address		
Your Phone # at School	Your Phone # at Home	Your Cell Phone #	Email Address	
Alternative E-mail	Facebook Login Name	MySpace URL	Other	

**2. SCHOOL INFORMATION**

Name and financial aid address of school you will attend	Phone #	
	# of credits you will take	
	Expected Graduation Date	Date class Schedule will be submitted:
Area of Study (i.e. accounting, nursing, CDL, construction )	<input type="checkbox"/> Associate's <input type="checkbox"/> Certificate <input type="checkbox"/> Bachelor's <input type="checkbox"/> Vocational Training <input type="checkbox"/> Master's <input type="checkbox"/> Other _____ <input type="checkbox"/> Doctorate	
I am will be enrolling as a: <input type="checkbox"/> Freshman (0-29 credits) <input type="checkbox"/> Sophomore (30-59 credits) <input type="checkbox"/> Junior (60-94 credits) <input type="checkbox"/> Senior (95 plus credits) <input type="checkbox"/> Graduate <input type="checkbox"/> Vocational Training Student		
Term applying for 20____ Spring ____ Winter ____ Fall ____ Summer ____ Other _____		
The school operates on <input type="checkbox"/> Semester <input type="checkbox"/> Quarter <input type="checkbox"/> Trimester <input type="checkbox"/> Vocational Training Sessions First day of instruction: _____ Last day of instruction: _____		

**3. ACADEMIC INFORMATION**

Most recent GPA:	<input type="checkbox"/> College
	<input type="checkbox"/> Vocational Training
Semester GPA _____	Cumulative GPA _____ Total # of Credits Earned This Term _____

**DO YOU PLAN TO RETURN TO THE BERING STRAIT REGION AFTER YOUR EDUCATION IS COMPLETE?**

\_\_\_\_ Yes (community \_\_\_\_\_)    \_\_\_\_ No    \_\_\_\_ Uncertain

#### 4. FINANCIAL INFORMATION

RESOURCES	Applied	Awarded
Bering Straits Foundation		
Kawerak, Nome Eskimo Community, Gambell (BIA scholarships)		
Norton Sound Economic Development Corporation		
Norton Sound Health Corporation		
Regional/Village Corporation		
College Scholarships (academic, athletic, etc.)		
National Guard/Military Benefits		
State of AK DOL (STEP/WIA)		
Free Application for Federal Financial Aid (FAFSA)/Pell Grant		
Loans (specify)		
Employment (part or full time)		
Other (specify)		
Self		
<b>TOTALS</b>	\$ _____	\$ _____
EXPENSES		
Tuition		
Fees		
Books		
Supplies		
Meals		
Room		
Transportation		
Miscellaneous		
<b>TOTAL</b>	\$ _____	
<b>TOTAL BALANCE NEEDED</b> (Resources - Expenses)	\$ _____	

#### 5. STATEMENT OF UNDERSTANDING

I hereby attest that the information contained in this application is true, correct, and complete. The scholarship award(s) will be used to further my education for the program I have enrolled in. I understand that the funds must apply toward tuition, registration fees, books and campus related room and/or board expenses. I understand that any unspent funds will be returned. **I further understand that upon completion of the term for which I received scholarships I will submit an official transcript with the continuing CACHE application to each organization.** Upon my request, the CACHE organizations may share my official transcript with each other. I give permission for Bering Straits Foundation, Norton Sound Economic Development Corporation, Kawerak, Norton Sound Health Corporation and/or Sitnasuak Foundation, to publish my name, photo, school information, or other information I provide in any reports, press releases or publications; and they may share information I provide with each other.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date