



**Pokagon Band of Potawatomi Indians
Department of Education**

High School/College Dual Enrollment Assistance Form

Please note: This form must be submitted before the end of the semester of which the student is seeking assistance. Late requests will not be processed. This program is for senior high school students only.

Application Sections

Section A. (Please Print)

Name _____
(First) (MI) (Last)

Mailing Address _____ Tribal Enrollment # _____

City _____ State _____ Zip Code _____

Telephone _____ E-mail Address _____

Section B:

PLEASE COMPLETE

High School attending _____

College Attending _____ # Credits _____

Starting date of program _____

Amount of funding requesting _____ (Not to exceed \$400 per semester)

Request is for: _____ Tuition _____ Books _____ Additional fees

Request is for: _____ Reimbursement _____ Payment to programs

If reimbursement, please include proof of previous payment. If payment is to the programs

Please include paperwork showing fees and where to send check.

Students must also submit: College Semester Schedule & Proof from high school or college showing student is dually enrolled

Section C:

Please submit copy of Pokagon Tribal ID Card and sign the following statement of certification

The information given by me on this form is accurate and complete to the best of my knowledge. All application materials become the property of the Pokagon Band Department of Education. Awards are based upon available funding.

Signature of Student

Date

Signature of Parent (if student is under 18)

Date

**Please return this completed form with supporting documents to: Pokagon Department of Education
P.O. BOX 180, DOWAGIAC, MI 49047/ Fax: 1-269-782-0985**

For more information, please contact the Department of Education at 269-782-0887 or 1-888-330-1234