



SNOQUALMIE INDIAN TRIBE

ADULT EDUCATIONAL ENRICHMENT

ACTIVITIES BENEFIT APPLICATION

The Snoqualmie Indian Tribe has established the Adult Educational Enrichment Activities Benefit to assist and support adult, enrolled Snoqualmie Tribal Members who are looking to participate in, or are participating in, continuing education and educational enrichment activities.

ELIGIBILITY

To be eligible to receive this Scholarship, the applicant must be an adult, enrolled Snoqualmie Tribal Member and eligible to receive Tribal services.

AVAILABLE SCHOLARSHIP AMOUNT

An eligible student may receive up to \$3,000 per Tribal Academic Year (July 1-June 30) for eligible educational enrichment expenses. This scholarship is a discretionary scholarship authorized by the Snoqualmie Tribal Council and is subject to Tribal Council appropriations. Tribal Council reserves the right to alter or eliminate the scholarship at any time and for any reason. The Benefit authorized is intended to qualify for tax-free treatment to the fullest extent permitted by law.

ELIGIBLE EXPENSES

Items that may be covered by this Benefit include:

- A. **Activities:** Registration expenses, tuition, and fees for activities that enrich one's learning and educational pursuits but do not necessarily result in a degree, including but not limited to:
 1. Continuing education classes
 2. Arts or music courses/lessons
 3. Training sessions, workshops, or conferences
- B. **Supplies, Lodging, and Transportation:** Educational materials, lodging, and transportation costs related to the aforementioned eligible Activities expenses, up to a maximum of \$1,500 each Tribal Academic Year, which is deducted from the overall benefit.

LIMITATIONS

- A. Items not covered include: fines and penalties; items that are considered lavish or extravagant, non-educational supplies and technology; and other items deemed ineligible by the Education Department.

PAYMENT OPTIONS

Payment of eligible expenses are made as a direct payment to the Adult.

To obtain the Benefit you must provide:	
<input type="checkbox"/> This signed, completed Application	<input type="checkbox"/>
<input type="checkbox"/> W-9 for you	<input type="checkbox"/>
<input type="checkbox"/> Proof of enrollment in program/activity	<input type="checkbox"/>
<input type="checkbox"/> Proof of your payment for the expense (e.g., the original, legible receipt or cancelled check)	<input type="checkbox"/>
<input type="checkbox"/>	

Submit all applications and documentation to the Snoqualmie Indian Tribe Education Department:

Email: education@snoqualmietribe.us

Fax: 206.600.6487

Mailing Address: PO Box 969 Snoqualmie, WA 98065

Phone: 425.888.6551 extension 1119



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APPLICANT INFORMATION

Name: _____ Enrollment Number: _____

Phone Number: _____ Email Address: _____

Mailing Address: _____

City/State/Zip: _____

VENDOR INFORMATION

Name of School/Program/Vendor: _____

Contact Person: _____ Contact Number: _____

Contact Email: _____

PAYMENT INFORMATION

Description of Activity and Requested Expenses:	
Total funding requested:	Time period requested for:
Total program cost:	Other Financial Aid received:



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FUNDING ACCEPTANCE AGREEMENT

(initial each section after reading)

_____ I hereby agree that I will fully participate in the above-described activity for the purpose of educational enrichment, and that I will follow all rules, regulations, and attendance requirements of the activity.

_____ I hereby agree that the funds issued to me pursuant to this Application are for educational and/or cultural purposes only and will only be used for such purposes. I will obtain Education Department approval before using the funds in any way other than described above.

_____ I understand that if I do not enroll, if I withdraw, or if I otherwise fail to successfully complete the program/activity during the above-indicated time period for funding use, I may be required to REIMBURSE all funds to the Tribe and I will not be eligible for additional funding from this Program until the amount is paid back in full. Under the Federal Tax Rules, a Benefit payment that is not used for the purposes provided for in this Policy will be treated as taxable income by the IRS.

The Snoqualmie Tribal Council wishes to ensure that no Tribal member in the community will be without basic fundamental necessities of life. The Adult Educational Enrichment Activities Benefit Program will not completely fund all of members' financial and other needs but is designed to lessen the burden of continuing education expenses to enrich their everyday lives. It is the intent of Tribal Council that the Program be provided as a benefit to support the general welfare of the Tribal community and that payments issued under the Program will not be subject to state or federal taxation. However, recipients should consult with their own tax and/or legal professionals to determine actual tax and benefit consequences and recommended uses, as well as impact on fixed income or other benefits of the recipients.

By signing, I certify the information contained in this application packet is complete and accurate to the best of my knowledge

Signature: _____ Date: _____