

ALGONQUIN LONGHOUSE HAYLUSHKA HONOR SCHOLARSHIP APPLICATION FORM

Applications must be received by the Algonquin Longhouse Federation no later than **May 1st** and include:

- Application Form (below)
- Official transcript listing courses taken and grades received on page 3
- Three letters of reference, two from an adult non-family member and one from a current instructor.
- Recent picture (preferable electronic graduation picture) for publicity purposes
- Please note the special requirements for scholarships on page 2 of this document.

Personal Data

Last Name	First Name	Middle Initial
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Permanent Address	City	State	Zip Code
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Date of Birth	Email:	Telephone Number
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Parent/Guardian	Address	City	State	Zip Code
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Parent/Guardian	Address	City	State	Zip Code
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Sibling names and date of birth

Years active in the Algonquin Longhouse?	Year of earning the Haylushka Honor	Year graduated from program?
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Educational Data

High school attended	Graduation date
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Address	City	State	Zip Code
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Name of Post-Secondary School for Which Scholarship is Requested	Telephone Number
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Address	City	State	Zip Code
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Anticipated Graduation Date	Major Field of Study	Full-Time/Part- Time Status
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Career Goal

Program, Community and Church Involvement: List all activities in which you have actively participated (attach an additional page if necessary).

Activity/Service	Years Participated

Work Experience: Describe your work experience during the past 4 years (attach an additional page if necessary).

Position	Date From (Mo/Yr.)	Date To (Mo/Yr.)	Hours Per Week

ADDITIONAL REQUIREMENTS:

- All applicants applying for this scholarship must write an essay on:
 - what the Algonquin Longhouse Indian Guide or Indian Princess Program means to you
 - what you plan to do with your education

References

Provide the following information on those people whom you have asked to prepare a letter of reference. These recommendations must be dated within the present school year.

Name Occupation

Address Phone

Name Occupation

Address Phone

Instructor's Name Area of instruction

Address Phone

Transcript Information

Currently enrolled post- secondary education students must include an official transcript of grades from all institutions attended dated within the past year. High school seniors or students who have completed less than one full semester of post- secondary education must include a high school transcript and if possible, have the following section completed by a school official.

Applicant Rank/Class Size Cumulative GPA (A=4.0)

School Official's Name and Signature Telephone Number

Certification

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 scholarship eligibility. I also agree that if I do not use the scholarship for the above-mentioned education, I will repay the scholarship in full to the Algonquin Longhouse.

Applicant's Signature Date

Applicants are encouraged to follow up with the Federation Chief two weeks prior to the deadline of the scholarship to verify the application is received and complete.

Algonquin Longhouse, Inc. NFP
P.O. Box 603, Palatine, IL 60078-0603
chief@algonquinlonghouse.org

**ALGONQUIN LONGHOUSE
HAYLUSHKA HONOR SCHOLARSHIP
PERSONAL RECOMMENDATION FORM**

To Be Completed by The Applicant:

Name of Applicant	Address	City	State	Zip Code
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Post-Secondary School Which Student Will Attend	Major Field of Study
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To Be Completed by The Reference:

1. How long have you known this student and in what capacity?

2. Why should this student receive this scholarship? Or why would you recommend this student for this scholarship?

3. Are you aware of any financial difficulties that this student might face in financing his/her education?

Name	Address	City	State	Zip Code
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Company or Organization	Position	Phone
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Signature

Please email by May 1st to: chief@algonquinlonghouse.org

Note: A letter containing the same information listed on this form may be submitted.

**ALGONQUIN LONGHOUSE
HAYLUSHKA HONOR SCHOLARSHIP
PERSONAL RECOMMENDATION FORM**

To Be Completed by The Applicant:

Name of Applicant	Address	City	State	Zip Code
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Post-Secondary School Which Student Will Attend	Major Field of Study
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To Be Completed By The Reference:

1. How long have you known this student and in what capacity?

2. Why should this student receive this scholarship? Or why would you recommend this student for this scholarship?

3. Are you aware of any financial difficulties that this student might face in financing his/her education?

Name	Address	City	State	Zip Code
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Company or Organization	Position	Phone
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Signature

Please email by May 1st to: chief@algonquinlonghouse.org

Note: A letter containing the same information listed on this form may be submitted.

**ALGONQUIN LONGHOUSE
HAYLUSHKA HONOR SCHOLARSHIP
INSTRUCTOR RECOMMENDATION FORM**

To Be Completed by The Applicant:

Name of Applicant	Address	City	State	Zip Code
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Post-Secondary School Which Student Will Attend	Major Field of Study
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To Be Completed by The Reference:

1. How long have you known this student and in what capacity?

2. Why should this student receive this scholarship? Or why would you recommend this student for this scholarship?

3. How has the applicant grown in their major field of study? How have they contributed to the school/college?

4. Are you aware of any financial difficulties that this student might face in financing his/her education?

Name	Address	City	State	Zip Code
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Company or Organization	Position	Phone
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Signature

Please email by May 1st to: chief@algonquinlonghouse.org

Note: A letter containing the same information listed on this form may be submitted.