

# Cultural & Heritage Study Scholarship Application Form

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Dear Shareholder:

Attached is a Shee Atiká Scholarship Program Cultural & Heritage Study application. Please thoroughly complete and return the written portion of this application with all required attachments. The application deadline is as follows:

**March 7, 2025**

Emailing (info@sheeatika.com) your PDF application and attachments is the recommended method of submitting your request for a scholarship. NO FAXING your application. No exceptions will be made for late applications. Applications must be received by the close of business on the due dates listed above. We have one application deadline per year. Our funding cycle is August 1 – July 31 each year.

The Scholarship Committee consists of shareholders and is a separate committee from your Board of Directors. Your current committee is as follows:

- Katherine Staton - Eugene, OR
- Stephanie Masterman - Seattle, WA
- Marta Wilmoth - Independence, KY

Please contact the office if you have any questions.

## **SCOPE AND PURPOSE**

It is the intent and desire of the Board of Shee Atiká Incorporated (SAI) to promote and perpetuate the learning, preservation and appreciation of our shared heritage with as many shareholders as possible. To achieve this goal, the corporation makes available funding to help defray the costs for participating in an instructional pursuit related to the identified traditional practice or art forms. The purpose of the grant is to assist individuals in the pursuit of classes which preserve, promote and maintain the traditional culture, tribal organization and/or lifestyle of the Alaska Native people. **Applicants are expected to have other resources and understand that awards from Shee Atiká will serve to supplement those resources.** All decisions made by the Scholarship Committee regarding grants are final.

## **ELIGIBILITY**

To be eligible to apply for a Shee Atiká award you must be a Class A Shareholder of Shee Atiká, Inc. Funding may cover course fees, materials, supplies, tools required by the course work, travel and housing expenses. Awards under this program may be made to Class A shareholders of any age at the discretion of the Committee. The total of all awards made to a Class A shareholders under the age of 18 shall not exceed 25% of the current lifetime maximum award.

## **APPLICATION PROCEDURES**

1. The attached application must be complete. Write "N/A" in the blank if the question is not applicable. Incomplete applications will not be considered.
2. Attach copies of pamphlets, brochures, etc. regarding the course you are studying. The attached Course Outline needs to be completed by the Instructor.
3. Submit one letter of recommendation from a current cultural/heritage instructor or Native Artist.
4. Itemized price list of basic tools/supplies for beginners as recommended by the instructor.

## **DISBURSEMENT OF FUNDS**

This program shall only be used to fund recognized and organized classes, not for one-on-one training. Funds will be distributed to the program of study, supply vendor, transportation or lodging company on behalf of a scholarship recipient. Funds will not be disbursed directly to any student.

## **COMPLETION OF STUDY**

You must submit a report to the Scholarship Committee at the end of the project period, which includes the following information:

1. Photographs, slides, or written descriptions of the learning experience or a sample of the product or skill learned.
2. An evaluation of the education experience and instructor.
3. An evaluation and attendance report from the instructor.
4. In order to be considered for future scholarships, your written description, photographs, or slides regarding the training received must be submitted for your file.

## Cultural & Heritage Study Written Application

Fill in all blanks. If more room is needed, include an attachment. Please type or print legibly.

### GENERAL INFORMATION

Last Name (as it appears on record)	First	Middle
Social Security Number		
Street Address or P.O. Box (mailing address)		
City	State	Zip
(Area Code) Phone and/or Cell Phone		Date of Birth
Email Address		

### PERSONAL GOAL STATEMENT (please explain on a separate piece of paper)

1) Describe the traditional art form/practice you intend to study, 2) How will this help you preserve, promote, or maintain traditional Alaska Native culture? (this should be about 1 page)

Name of School or Sponsoring Agency: \_\_\_\_\_

Address and Phone Number: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

### BUDGET FORECAST

Tuition/Instructor's Fee	\$	
Course Fees		
Materials/Supplies ( <i>attach itemized list</i> )		
Tools ( <i>attach itemized list</i> )		
Transportation		
Lodging		
<b>TOTAL</b>	<b>\$</b>	

### APPLICANT'S RESOURCES

Total Resources Expenses     \$ \_\_\_\_\_  
 minus Resources                     \$ \_\_\_\_\_

*FOR OFFICE USE ONLY:* \_\_\_\_\_

Date of last award: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

## Cultural & Heritage Study Written Application

Date for which this award is requested: \_\_\_\_\_ to \_\_\_\_\_  
Month/Day/Year Month/Day/Year

Amount requesting from the Shee Atiká Scholarship Committee: \$ \_\_\_\_\_ \*NOT TO EXCEED \$3,000 PER ACADEMIC YEAR (August 1 through July 31).\*

Please Note: This amount is not separate from receiving an academic scholarship.

My signature below certifies that to the best of my knowledge the information given is true and correct. I authorize Shee Atiká to release this information as may be necessary to any other agency providing financial aid. This also authorizes release of academic & financial aid award/announcements for the Shee Atiká newsletters. I will provide a written description, photos, slides or tapes upon completion of the training received and will not be eligible for future funding until received.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print or Type Name of Applicant

### STUDENT CHECKLIST:

Initial each check list item to confirm completeness of application

Student

Staff

Have you and your instructor completed your reports from your last Cultural & Heritage Scholarship award?

Completed application form?

Course Outline (completed by your prospective instructor) OR brochure/pamphlet attached?

Itemized price list for tools and supplies attached?

W-9 (required) attached?

Letter of Recommendation attached? (current or previous cultural instructor)

Personal Goal Statement

**REMINDER – APPLICATION DEADLINE: by the close of business**

March 7, 2025

INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.

**SHEE ATIKÁ SCHOLARSHIP CULTURAL & HERITAGE STUDY  
INSTRUCTOR'S PROJECTED COURSE OUTLINE**

To be completed by the instructor if a course description is not available through the school.

Instructor Name: \_\_\_\_\_

Course Title: \_\_\_\_\_

Class Hours and Days: \_\_\_\_\_

**COURSE DESCRIPTION** (*describe what the student will learn or attach a course description*)


**INSTRUCTOR'S BACKGROUND** or attached biography (*indicate "see attached" if attaching a resume*):


\_\_\_\_\_  
Instructor Signature

\_\_\_\_\_  
Date

## Request for Taxpayer Identification Number and Certification

**Give Form to the  
requester. Do not  
send to the IRS.**

<b>Print or type See Specific Instructions on page 2.</b>	Name (as shown on your income tax return)	
	Business name/disregarded entity name, if different from above	
	Check appropriate box for federal tax classification: <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate  <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____  <input type="checkbox"/> Other (see instructions) ▶ _____	
	<input type="checkbox"/> Exempt payee	
	Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
City, state, and ZIP code		
List account number(s) here (optional)		

### Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

<b>Social security number</b>									

**Note.** If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

<b>Employer identification number</b>									

### Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person (defined below).

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 4.

<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶
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### General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

#### Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

**Note.** If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

**Definition of a U.S. person.** For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

**Special rules for partnerships.** Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.