

Calista Scholarship Fund

Education & Development Director
301 Calista Court, Suite A
Anchorage, AK 99518-3028
Website: www.calistacorp.com

Phone: (907) 279-5516
Fax: (907) 644-6376
Toll Free: (800) 277-5516
Email: scholarships@calistacorp.com

CALISTA SCHOLARSHIP FUND CALISTA SCHOLARSHIP

CALISTA SCHOLARSHIP

The Calista Scholarship is funded by the Calista Scholarship Fund. The Calista Scholarship Fund is made possible through donations and fundraising. The purpose of the Calista Scholarship Fund according to the Articles of Incorporation state: *Provide financial assistance to Alaska Natives to enable recipients to participate in continuing educational activities, formal programs of study and programs to improve the status of Alaska Natives through education.*

Investing in the Calista region and developing the resources of the region includes development of the human resources in order to prepare shareholders and their descendants for independent living and economic self sufficiency. The goal of the Calista Scholarship Fund is to educate the leaders of tomorrow and promote self determination and cultural pride. Scholarship recipients are expected to use their education for the benefit of the region and its people.

The Calista Scholarship Fund was established in 1994 and has a 501 (c) (3) recognition under the Internal Revenue Service making donors eligible to receive tax deductible status on donations and gifts to the Calista Scholarship Fund.

ELIGIBILITY TO APPLY

CALISTA CORPORATION ENROLLEE OR DIRECT DESCENDENT: Applicant must be an original enrollee of the Calista Corporation or a direct descendant of a Calista Shareholder. Lineal descendants must submit a true and correct copy of their birth certificate or a copy of their Bureau of Indian Affair (BIA) Certificate Degree of Indian Blood (CDIB).

SCHOOL STATUS: Applicant must be accepted to an accredited school (vocational, trade, college, university) or provide a current letter of good academic standing from the school. The applicant must be considered full-time based on the schools requirements. Usually a student is considered full-time if they are an undergraduate student signed up for 12 or more credit hours per semester or a graduate student signed up for 9 or more credit hours per semester. The applicant must confirm with the school what is considered full-time status based on the schools requirements.

GRADE POINT AVERAGE (GPA): Applicant must be a high school graduate or have earned a General Equivalency Diploma (GED), be in good academic standing, and have a cumulative GPA of at least 2.0. Applicants must submit official transcripts and/or certificates of completion.

AREAS OF STUDY

Applicants are not restricted to a particular field of study, unless a Calista Scholarship Fund donor restricts their contribution to a specific area of study. For example, a mineral exploration company working with Calista lands may request their donation to the Calista Scholarship Fund include a stipulation that the funds only be awarded to a student of geology, engineering, or natural resources.

APPLICATION PROCESSING

All complete Calista Scholarship applications will be processed and reviewed. All decisions made by Calista Scholarship Fund are final. Applicants selected to receive a Calista Scholarship award will be notified prior to the upcoming academic year. The scholarship award recipient must provide Calista Scholarship Fund with a written acceptance of the Calista Scholarship. Upon receipt of the written acceptance, Calista Scholarship Fund will allocate scholarship funds, and mail the Calista Scholarship award directly to the recipient's school financial aid office. Calista Scholarship recipients must adhere to the Calista Scholarship requirements in order to continue to receive the scholarship for the full academic year.

APPLICATION

New Applicant - must submit:

- 1) Application Form
- 2) Copy of Birth Certificate or copy of BIA CDIB (if a direct descendant of a Calista Shareholder)
- 3) Letter of Acceptance or Current Letter of Good Standing from an Accredited School
- 4) Official Transcripts and/or Certificates of Completion from School Most Recently Attended
- 5) Cost Information Sheet from School Planning to Attend
- 6) One (1) page typed Personal Statement
- 7) One (1) Complete Reference Form

Returning Applicant – are not required to submit (2) and (7) from the list above.

SCHOLARSHIP AWARD

Calista Scholarship awards are as follows: \$500 per semester for Undergraduate recipients with a cumulate GPA of 2.0 to 2.49
\$750 per semester for Undergraduate recipients with a cumulative GPA of 2.5 to 2.99
\$1000 per semester for Undergraduate recipients with a cumulative GPA of 3.0 or higher
\$1500 per semester for Graduate recipients

The Calista Scholarship award is mailed directly to the recipient's school financial aid office. The recipient must provide Calista Scholarship Fund with the correct address for the financial aid office. Calista Scholarship Fund does not mail more than two scholarship award checks to the financial aid office during the academic year, whether the recipient's attending a school with a calendar based on semesters or quarters. Calista scholarships are awarded for the academic year, however, the second semester scholarship check is not sent by Calista Scholarship Fund to the school financial aid office until official transcripts from the previous semester are received and it is verified the recipient meets the required cumulative GPA of at least 2.0. Official transcripts must be received by Calista Scholarship Fund no later than January 15. Further distribution of the Calista Scholarship will discontinue if recipient does not submit required official transcripts by the due date. If for any reason the scholarship is not used for the educational program approved by Calista Scholarship Fund and/or recipient does not fulfill the scholarship requirements which may include, but are not limited to, withdrawing from school and/or incompleting of courses; the recipient may not apply for the Calista Scholarship for one (1) full academic year from the initial date of award. Each situation will be reviewed on a case by case basis and all decisions made by Calista Scholarship Fund are final.

APPLICATION DUE DATE

The Calista Scholarship application and required materials must be mailed postmark or delivered by the due date. Late and incomplete applications will not be reviewed, additional materials will be discarded, and submitted materials become the property of Calista Scholarship Fund and cannot be returned. The application must be mailed postmarked or delivered by **June 30 of each year** to: Calista Scholarship Fund, 301 Calista Court, Suite A, Anchorage, AK 99518-3028

Revised: Date

Calista Scholarship Application Due: **June 30**

Calista Scholarship Fund

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CALISTA SCHOLARSHIP APPLICATION

APPLICANT

APPLICATION STATUS <input type="checkbox"/> NEW APPLICANT <input type="checkbox"/> RETURNING APPLICANT			FIRST NAME	M.I.	LAST NAME	
GENDER <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	BIRTHDATE	SOCIAL SECURITY NUMBER	E-MAIL		HOME PHONE	CELL PHONE
ADDRESS AT SCHOOL (if different from permanent address)			PERMANENT ADDRESS (correspondence will be mailed to this address)			
CITY		STATE	ZIP	CITY		STATE ZIP

SHAREHOLDER INFORMATION

I certify that I am a: Calista Shareholder Direct Descendent of a Calista Shareholder

If you are a direct descendent, provide name(s) of the shareholder of family member(s) enrolled in Calista Corporation and submit a true and correct copy of your birth certificate or a copy of your BIA Certificate Degree of Indian Blood (CDIB) with this application.

PARENT NAME (First, Last, M.I.)	GRANDPARENT NAME (First, Last, M.I.)	GREAT-GRANDPARENT NAME (First, Last, M.I.)
PARENT NAME (First, Last, M.I.)	GRANDPARENT NAME (First, Last, M.I.)	GREAT-GRANDPARENT NAME (First, Last, M.I.)

EDUCATION PLAN

[] ATTACH A LETTER OF ACCEPTANCE (if new applicant) or CURRENT LETTER OF GOOD STANDING (if returning applicant)

SCHOOL CALENDAR BASED ON <input type="checkbox"/> SEMESTERS <input type="checkbox"/> QUARTERS		ACCREDITED SCHOOL (VOCATIONAL, TRADE, COLLEGE, UNIVERSITY) PLANNING TO ATTEND			
PLANNED DEGREE <input type="checkbox"/> 2-YR ASSOCIATE <input type="checkbox"/> 4-YR BACHELOR <input type="checkbox"/> MASTER <input type="checkbox"/> DOCTORATE <input type="checkbox"/> CERTIFICATE <input type="checkbox"/> OTHER:	PLANNED STATUS <input type="checkbox"/> FRESHMAN <input type="checkbox"/> SOPHOMORE <input type="checkbox"/> JUNIOR <input type="checkbox"/> SENIOR <input type="checkbox"/> CERTIFICATE <input type="checkbox"/> OTHER:	FIELD OF STUDY (major)	SCHOOL FINANCIAL AID OFFICE ADDRESS		
		FIELD OF STUDY (minor)	CITY	STATE	ZIP
		FIELD OF STUDY (other)	PHONE	FAX	
PLANNED CREDITS	IS THIS CONSIDERED FULL-TIME <input type="checkbox"/> YES <input type="checkbox"/> NO	SEMESTER/TERM START DATE	EXPECTED GRADUATION DATE		

EDUCATION HISTORY

[] INCLUDE OFFICIAL TRANSCRIPTS AND/OR CERTIFICATES OF COMPLETION FROM SCHOOL MOST RECENTLY ATTENDED

HIGH SCHOOL	CITY	STATE	START DATE	GRADUATION DATE	DID YOU COMPLETE A GED <input type="checkbox"/> YES <input type="checkbox"/> NO GED COMPLETION DATE		
POSTSECONDARY SCHOOLS	CITY	STATE	START DATE	GRADUATION DATE	MAJOR	DEGREE	CREDITS EARNED

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EDUCATION BUDGET

ATTACH COST INFORMATION SHEET FROM SCHOOL PLANNING TO ATTEND

EXPENSES	AMOUNT	FUNDING SOURCE	AMOUNT
TUITION	_____	PERSONAL / FAMILY CONTRIBUTION e.g. PFD	_____
FEES	_____	TUITION WAIVER	_____
BOOKS AND REQUIRED SUPPLIES	_____	SCHOLARSHIPS (specify):	_____
ON-CAMPUS HOUSING / OFF-CAMPUS RENT	_____	TRIBAL SCHOLARSHIP/GRANTS e.g. Pell Grant (specify):	_____
MEALS	_____	STATE/FEDERAL LOANS e.g. Alaska Student Loan (specify):	_____
OTHER (specify):	_____	OTHER SOURCES e.g. Veterans, Social Security, etc. (specify):	_____
TOTAL EXPENSES:	_____	TOTAL CONTRIBUTION:	_____
		FINANCIAL NEED (TOTAL CONTRIBUTION – TOTAL EXPENSES):	_____

PERSONAL STATEMENT

ATTACH A ONE (1) PAGE TYPED (additional pages will not be reviewed) PERSONAL STATEMENT INCLUDING:

- What are your educational and career goals and how do you plan to achieve them?
- What encouraged you to pursue your educational and career goals?
- What will you do to contribute to the community upon completion of your educational and career goals?

REFERENCE FORMS

ATTACH ONE (1) COMPLETE REFERENCE FORM

ASSIGNMENT OF RIGHTS/WAIVER OF LIABILITY

I, the undersigned, have the authority to hereby grant Calista Scholarship Fund and its affiliates, including Calista Corporation (Collectively referred to as "Calista") the right and permission to use, at Calista's discretion, photographs and images of me, as well as my biographical information disclosed to Calista by me for promotional and/or informational purposes. I understand that no monetary or other compensation will be offered to me in exchange for these rights and permissions. Usage encompasses, but is not limited to, newsletters, printed publications and other collateral, internet and web sites, advertising, video and/or audio presentations. I forever release, discharge, and agree to hold Calista and its affiliates, officers, directors, employees, and agents harmless from any liability by virtue of any use whatsoever of said photographs, images or biological information.

 Applicant Permanent Mailing Address, City, State, Zip

 Applicant Phone

 Print Name of Applicant

 Signature

 Date

 Print Name of Parent or Legal Guardian (if subject is a minor)

 Signature

 Date

STATEMENT

APPLICATION: I certify that all information and documentation in this application including, but not limited to the application, letter of acceptance or current good standing, official transcripts and/or certificates of completion, budget information and forms, personal statement, reference form and any other supporting materials, is true and correct. I understand this application does not commit Calista Scholarship Fund to award a scholarship. I also understand any decisions made by Calista Scholarship Fund are final. I understand incomplete applications will not be reviewed, additional materials will be discarded, and submitted materials become the sole property of Calista Scholarship Fund and cannot be returned.

USE OF FUNDS: I understand the scholarship, if awarded, will be used to further my education in the educational program approved by Calista Scholarship Fund. If for any reason the scholarship is not used for the educational program approved by Calista Scholarship Fund and/or I do not fulfill the scholarship requirements which may include, but are not limited to, withdrawing from school and/or incompleting of courses; I understand I may not be permitted to apply for the Calista Scholarship for one (1) full academic year from the initial date of award. Each situation will be reviewed on a case by case basis and all decisions made by Calista Scholarship Fund are final. I understand I must immediately notify Calista Scholarship Fund of any changes to my academic status.

OFFICIAL TRANSCRIPTS: I understand and agree to send Calista Scholarship Fund the official transcripts from my school no later than January 15. I understand scholarship funds will not be sent by Calista Scholarship Fund to the school without the receipt of the course schedule or official transcripts.

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STATUS AND GPA: I understand, I must maintain a full-time status confirmed by my educational program and a cumulative GPA of 2.0 or higher for the entire academic year.

I have read and understand the "Statement" and, if approved, agree to abide by the terms and conditions of the scholarship.

 Print Name of Applicant

 Signature

 Date

 Print Name of Parent or Legal Guardian (if subject is a minor)

 Signature

 Date

CALISTA SCHOLARSHIP REFERENCE FORM

The applicant below is applying for the Calista Scholarship, which is funded by the Calista Scholarship Fund. The purpose of the Calista Scholarship Fund according to the Articles of Incorporation state:

Provide financial assistance to Alaska Natives to enable recipients to participate in continuing educational activities, formal programs of study and programs to improve the status of Alaska Natives.

Investing in the Calista region and developing the resources of the region includes development of the human resources in order to prepare shareholders and their descendants for independent living and economic self sufficiency. The goal of the Calista Scholarship Fund is to educate the leaders of tomorrow and promote self determination and cultural pride. Scholarship recipients are expected to use their education for the benefit of the region and its people.

Please complete the Calista Scholarship Reference Form and return to the applicant.

APPLICANT INFORMATION:

FIRST NAME	M.I.	LAST NAME
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REFERENCE INFORMATION (must not be related to applicant by blood or marriage):

FIRST NAME	M.I.	LAST NAME	RELATION TO APPLICANT (e.g. teacher, employer, etc.)	DATE	
ADDRESS			E-MAIL	HOME PHONE	CELL PHONE
CITY		STATE	ZIP	OCCUPATION	EMPLOYER

PLEASE PROVIDE A WRITTEN RESPONSE:

How do you know the applicant?

What is your knowledge of the applicant's education and/or work experience and accomplishments?

What is your knowledge of the applicant's potential to accomplish their educational and career goals?

I certify that I am not related to the applicant by blood or marriage and that all information provided on this Calista Scholarship Reference Form is true and correct.

Revised: Date

Calista Scholarship Application Due: **June 30**

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Print Name of Reference _____

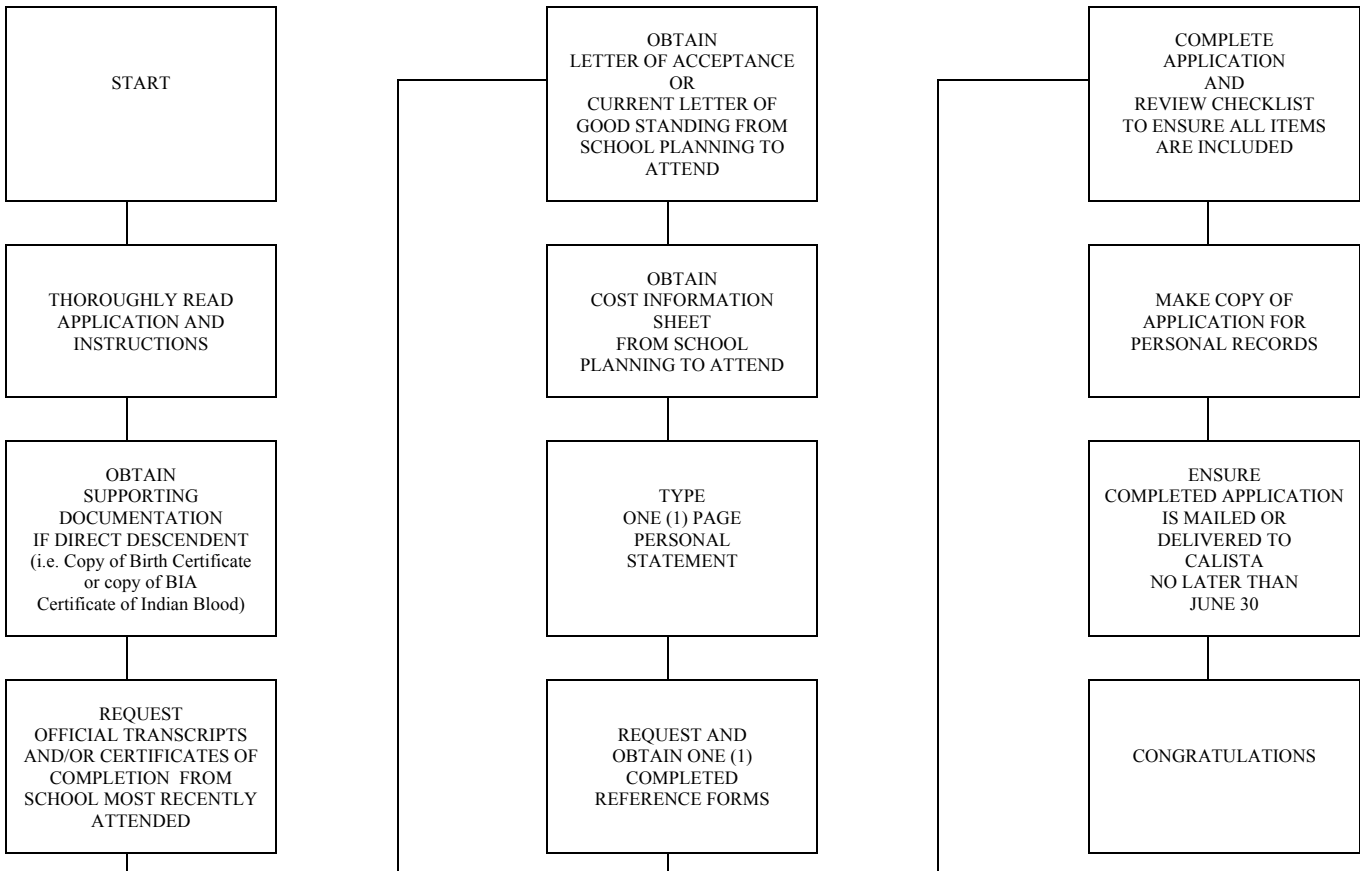
Signature _____

Date _____

APPLICATION CHECKLIST

POSTMARK OR DELIVERY DUE DATE:	JUNE 30
<input type="checkbox"/>	APPLICATION FORM
<input type="checkbox"/>	COPY OF BIRTH CERTIFICATE <u>OR</u> COPY OF BIA CERTIFICATE DEGREE OF INDIAN BLOOD (CDIB) (if a direct descendent of a Calista Shareholder)
<input type="checkbox"/>	LETTER OF ACCEPTANCE <u>OR</u> CURRENT LETTER OF GOOD STANDING FROM AN ACCREDITED SCHOOL
<input type="checkbox"/>	OFFICIAL TRANSCRIPTS <u>AND/OR</u> CERTIFICATES OF COMPLETION FROM SCHOOL MOST RECENTLY ATTENDED (transcripts sealed by the school – ensure envelope remains sealed)
<input type="checkbox"/>	COST INFORMATION SHEET FROM SCHOOL PLANNING TO ATTEND
<input type="checkbox"/>	ONE (1) PAGE TYPED PERSONAL STATEMENT
<input type="checkbox"/>	ONE (1) COMPLETE REFERENCE FORM

PROCESS FLOW CHART



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