



## Career Grant Application

**ELIGIBILITY:** Applicants must be an original shareholder or lineal descendant (by birth or adoption) of an original shareholder of The Tatitlek Corporation (TTC). All lineal descendants must be registered in The Tatitlek Corporation with complete documentation.

**PROGRAM:** Available for students seeking short term, job-ready training such as an accredited short-term certificate or licensing classes that will result in entry level or first time employment of a new field for the applicant or advance their current career path.

**FUNDING LEVELS:** Career Grants are for tuition, fees, and course materials. Students must be enrolled in an accredited training or program. Funds are paid by the Copper Mountain Foundation directly to the institution. Students are eligible for actual cost of the training/course up to \$1,000 annually.

**PROBATIONARY PERIOD:** Students must complete/pass all courses they receive funding for. Failure to meet this obligation will place the recipient’s scholarship on hold for the next funding period. If these terms are not met while on the probationary period, future funding will not be granted until terms have been met.

**DEADLINES:** Students must submit an application before the start of the training or program. Copper Mountain Foundation does not provide reimbursements or retroactive funding.

**HOW TO APPLY:** Complete the following:

- Complete Descendant Registration (if applying as a descendant and not yet registered as a descendant)
- Career Grant Application
- Course/Training Information including complete expenses
- Enrollment Verification Letter From Course/Training Instructor or Organization

**MAIL TO:**  
 Copper Mountain Foundation  
 561 E. 36<sup>th</sup> Ave. Ste. 400  
 Anchorage, AK 99503

**Or EMAIL TO:**  
[Scholarships@tatitlek.com](mailto:Scholarships@tatitlek.com)

**Or FAX TO:**  
 (907) 278-4050  
 Attn: CMF Staff

### A. STUDENT INFORMATION

<input type="checkbox"/> NEW APPLICANT <input type="checkbox"/> REPEAT APPLICANT	Date		
Name	SSN	DOB	
Street	City	ST	Zip
Phone	Email		

**B. ELIGIBILITY**

Eligibility (check one): <input type="checkbox"/> Original Enrollee <input type="checkbox"/> Descendant of an Original Enrollee		Employee of The Tatitlek Corporation: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Name & Relationship of Relative who is original enrollee:			
Direct descendant or relative of Board member of Copper Mountain Foundation or The Tatitlek Corporation: <input type="checkbox"/> Yes <input type="checkbox"/> No    If 'Yes', Name & Relationship of Relative: _____			

**C. PROGRAM**

Name of Institution/Organization		Phone	
Name of Contact		Email	
Address	City	State	Zip Code
Name of Training/Course		Dates of Training/Course	
How will this training/course supplement your career development?			

**D. TERM EXPENSES AND SOURCES OF FINANCIAL ASSISTANCE**

Training /Course Expenses	Amount
Tuition and Fees	
Books/Supplies	
Other	
<b>Total Expenses</b>	

Sources of Funding	Amount
Personal Funds	
Employer Contribution	
Total of additional Scholarships	
<b>Total Financial Aid</b>	

To the best of my knowledge and belief, the information in this application packet is true and correct. My submission of this application does not create any funding obligations for Copper Mountain Foundation. If I do not complete the school terms described in this application, I acknowledge that Copper Mountain Foundation will discontinue funding and, as appropriate, seek reimbursement of unused monies from the institution.

- I give permission for my name, grades and award information to be published in The Tatitlek Corporation newsletter and online by Copper Mountain Foundation or the Tatitlek Corporation for the purpose of discussing the scholarship and grant program.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print: \_\_\_\_\_