



# Great Lakes Indian Housing Association

## Scholarship Application

Please type or print. All fields must be complete.  
(Incomplete applications will not be considered.)

### I. Personal Information

First name \_\_\_\_\_ Last \_\_\_\_\_ M.I. \_\_\_\_\_

Mailing address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone number \_\_\_\_\_ Email Address \_\_\_\_\_

Date of birth \_\_\_\_\_

GLIHA Member Tribal Nation \_\_\_\_\_

Tribal Enrollment # \_\_\_\_\_

### II. Academic Information

High School attended \_\_\_\_\_ Graduation or GED date \_\_\_\_\_

School year applying for \_\_\_\_\_ ☐ New Student  
☐ Continuing Student

Term applying for ☐ Fall ☐ Spring ☐ Summer ☐ Winter

College/University you will attend \_\_\_\_\_

College/University address \_\_\_\_\_

Status Undergrad: ☐ Full-time (12 credits or more) ☐ Part-time (11 credits or fewer)  
Grad: ☐ Full-time (9 credits or more) ☐ Part-time (8 credits or fewer)

Year level ☐ Freshman ☐ Sophomore ☐ Junior ☐ Senior ☐ Graduate

College major \_\_\_\_\_ Expected graduation date \_\_\_\_\_

Expected degree ☐ AA ☐ AS ☐ AAS ☐ BA ☐ MA ☐ MS ☐ PhD ☐ JD

Number of college credit hours to date \_\_\_\_\_ Current GPA \_\_\_\_\_ Cumulative GPA \_\_\_\_\_



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### **III. Certification**

I certify to the best of my knowledge that the information contained in this application is correct.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Mail to:

Great Lakes Indian Housing Association  
GLIHA Scholarship Fund  
Linda McGraw-Adams  
P.O. Box 219  
Red Lake, MN 56671

Application **must** be postmarked by January 15, 2022. Any applications postmarked after January 15th will not be considered.