### **Adam Way Memorial Scholarship**

Tribal Council approved: 10-12-2021

### **About the Adam Way Memorial Scholarship**

The Adam C. Way Memorial Scholarship was established in 2021 by Susan and Gary Way in honor of their son, Adam Crary Way. Adam was passionate about sustainable, organic farming and was a man with great compassion for people. Susan and Gary were inspired in their meetings with the Ponca Tribe of Nebraska in the Tribe's push towards food sovereignty. Seeing that connection, Susan and Gary felt compelled to create a scholarship for Ponca tribal members to utilize.

The purpose of this scholarship is to promote education and self-sufficiency for members of the Ponca Tribe of Nebraska to strengthen and reinforce tribal sovereignty in all aspects.

### **Award**

The scholarship will be awarded annually over the course of 10 years. The initial amount will be \$1,000. If applicants are seeking further educational opportunities that amounts to less than that amount, an additional scholarship may be awarded so that the total of both do not exceed \$1,000.

The scholarship money will be paid to the Tribe who will disburse directly to the institution in question. In the event that the individual does not complete his/her educational course or completes it with less than a C average, as determined by a submitted transcript, he/she will be expected to reimburse the scholarship fund. Failure to do this will cause the individual to be in bad standing with the Tribe until the funds are reimbursed.

### **Eligibility**

The Adam Way Memorial Scholarship is available to all enrolled Ponca Tribe of Nebraska members, ages 18-45, currently residing in Nebraska, seeking to further his/her educational opportunities. These opportunities may range from seeking Associate, Bachelor, or Advanced degrees to other types of educational or trade certificates whose eligibility is determined by the Scholarship Selection Committee.

### **Application**

To apply for this scholarship, all prospective applicants are asked to supply the following:

- Proof of enrollment with the Ponca Tribe of Nebraska
- An essay explaining how the educational opportunity will be used to help the Tribe
- Three written character reference(Respondents need to be NON-FAMILY MEMBERS)
- A completed financial need form
- The Selection Committee may request an in-person or electronic interview.
- There is no cost to apply for this scholarship

The application deadline is midnight, June 15<sup>th</sup>. The awardee will be notified by August 1<sup>st</sup> of his/her acceptance.

#### Selection

The awardee will be selected at the sole discretion of the Scholarship Selection Committee. The selection committee will be made up of representatives of the Way family, and the Education Director and Culture Director for the Ponca Tribe of Nebraska. If an applicant is related to one of the above committee members, another tribal member shall be chosen by the committee.

# ADAM WAY MEMORIAL SCHOLARSHIP APPLICATION

### **STUDENT INFORMATION**

Name:		
Address:		
City:	State:	ZIP Code:
Phone:	Cell Phone:	Email Address:
Date of Birth:	SS#:	Tribal ID#:
PLEASE AN	SWER THE FOLLOWING Q	UESTIONS
Name of college you plan to atte	nd:	
Program of Study:		
Cost of Program:		
Cost for which the scholarship wi	ill be used:	
PLEASE INCL	UDE THE FOLLOWING AT	<b>FACHMENTS</b>
Proof of enrollment in the Ponca	Tribe of Nebraska	
Essay explaining how the Tribe w	rill benefit if you receive this sch	olarship
Three character references		
A completed Financial Need Forn	n	
Signed contract		
A final grade report (If a recent h	igh school graduate)	
	SIGNATURE	
Signature:		Date:

## ADAM WAY MEMORIAL SCHOLARSHIP

### **Contract of Understanding**

I,, will use the	he Adam Way Scholarship to assist
(Please Print Full Name)	
me with my career development. I also understand that I	am to maintain satisfactory
progress with a "C" or better and will provide the Selection	n Board with a transcript after
completion of each term for which the scholarship is being	used. If I do not maintain
satisfactory progress, I will reimburse the funds that I recei	ived.
Scholarship Recipient	Date

## ADAM WAY MEMORIAL SCHOLARSHIP FINANCIAL NEED FORM

VA Benefits Grant - State/Other Room Soc. Sec. Benefits Scholarship Board Welfare Benefits Direct Loan Travel Voc Rehab Unsub Loan Misc. Workforce Dev Waivers/Other Total Total Total  We recommend that the above, named student be awarded the following amount	NAME		STUDENT SCHOOL ID #				
Please note: All undergraduate students are required to complete and process the Free Application for Federal Student Aid (FAFSA) before digibility for this scholarship can be determined. The appropriate college/university is then to complete Part II of this form based on the resthe FAFSA and forward to:    PONCA TRIBE OF NEBRASKA ATTN: ADAM WAY SCHOLARSHIP PROGRAM ISBN 5YACUSE AVENUE NORFOLK, NE 68701 TELEPHORE: (402) 371-37564 EMAIL: pate@poncatribe-ne.gov or akmudsen@poncatribe-ne.gov  II, hereby, grant permission for all information on this form to be submitted to the above addressee.    Signature of Student Date	HOME ADDRESS						
Please note: All undergraduate students are required to complete and process the Free Application for Federal Student Aid (FAFSA) before ligibility for this scholarship can be determined. The appropriate college/university is then to complete Part II of this form based on the resthe FAFSA and forward to:    PONCA TRIBE OF NEBRASKA ATTN: ADAM WAY SCHOLARSHIP PROGRAM 1800 SYRACUSE AVENUE NORFOLK, NE 68701   TELEPHONE: (402) 371-834/PARS: (402) 371-7564 EMAIL: pate(iippontantibe-ne.gov or skindsendipponeatribe-ne.gov or skindsendipponeatri	CITY/STATE/ZIP		TRIBAL ENROLLMENT NO				
PONCA TRIBE OF NEBRASKA ATTN: ADAM WAY SCHOLARISHIP PROGRAM 1800 SYRACUSE AVENUE NORFOLK, NE 68701 TELEPHOPE: (402) 371-854 EMAIL: pate/aponearthe-ne.gov or skind-sen/aponearthe-ne.gov II, hereby, grant permission for all information on this form to be submitted to the above addressee.  Signature of Student  To BE COMPLETED BY THE FINANCIAL AID OFFICER:  This student has applied for the Adam Way Scholarship. Verified financial need information is required by the Selection Consector any action can be taken on this application. For the undergraduate student, please complete and forward this form or a form to the above addressee.  Budget Period: From to month/year month/year date  This student is considered: Independent Dependent Assessed Need Square Books Spouse Contribution PELL Grant Tuition Student Contribution SEOG Fees VA Benefits Grant - State/Other Room Soc. See. Benefits Direct Loan Travel Voc Rehab Unsub Loan Misc. Werkeromend that the above, named student be awarded the following amount  Financial Aid Officer* Date Telephone Number  Financial Aid Officer* Date Telephone Number	YEAR IN COLLEGE	MAJOR	MINOR	CREI	OIT HRS COMPLET	`ED	
ATTN: ADAM WAY SCHOLARSHIP PROGRAM 1800 SYRACUSE AVENUE NORFOLK, NE 68701 TELEPHONE: (402) 371-8834/FAX: (402) 371-7564 EMAIL: pate@poneatribe=ne.gov or akundesemponeatribe-ne.gov  I, hereby, grant permission for all information on this form to be submitted to the above addressee.  Signature of Student	eligibility for this scholarship						
II. TO BE COMPLETED BY THE FINANCIAL AID OFFICER:  This student has applied for the Adam Way Scholarship. Verified financial need information is required by the Selection Conbefore any action can be taken on this application. For the undergraduate student, please complete and forward this form or a form to the above addressee. Thank you for your assistance.  Budget Period: From to which starts on date month/year month/year date month/year month/year date  This student is considered: Independent Dependent Assessed Need \$  Parental Contribution PELL Grant Tuition Student Contribution Work Study Books Spouse Contribution SEOG Fees  VA Benefits Grant - State/Other Room Soc. Sec. Benefits Scholarship Board Welfare Benefits Direct Loan Travel Voc Rehab Unsub Loan Misc.  Workforce Dev Waivers/Other Total  We recommend that the above, named student be awarded the following amount		EM.	ATTN: ADAM WAY SCHOLAR 1800 SYRACUSE AV NORFOLK, NE 68 TELEPHONE: (402) 371-8834/FA	SHIP PROGRAM ENUE 3701 AX: (402) 371-7564	<u>ov</u>		
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