TENTEWATKÎENAWA:SE



TO HELP OUT ONE ANOTHER



• NATIVE AMERICAN INDIAN EDUCATION ASSOCIATION OF NEW YORK STATE •

Native American Indian Education Association of New York
2026-2027 Scholarship Application

First Name:_____Last Name:_____

Address:_____

City:_____State:_____

Zip Code:_____Email Address:_____

Telephone Number (include area code):_____

Tribal/Nation Affiliation:_____

College Attending:_____

College Address:_____

City:_____State:_____

Zip Code:_____Program of Study (or Intended Program of Study):_____

Complete all information below:
Undergraduate: (Y/N)_____ Graduate: (Y/N)_____
Full-Time: (Y/N)_____ Number of Credit Hours:_____
Part-Time: (Y/N)_____ Number of Credit Hours:_____
Expected Graduation Date:_____
High School You Attended:_____

The following must be included with this application form:
Show, by official certification, applicant is a member or child of an enrolled member from a recognized Tribe/Nation and applicant must reside in New York State.

Applicant must provide a copy of college acceptance letter or copy of current course listing for which you are registered at an Institute of Higher Learning.

Applicant must submit a personal letter stating the use of the scholarship, and if needed, the letter should express the need and expected use of the scholarship, your commitment to completing the degree, and other information you feel is relevant to being considered for this award. The letter must be word-processed.

Amount to be awarded: **$500 Undergraduate Scholarship**
$750 Graduate Scholarship

Email application and supporting documents, by: December 15, 2026 to: Monica at kanarataroroks@yahoo.com

Or mail the complete application, MUST be postmarked by: December 15, 2026

Return to: Monica Antone-Watson
15 Territory Rd.
Oneida, New York 13421