



# MICHIGAN INDIAN ELDERS ASSOCIATION



## 2026 SCHOLARSHIP APPLICATION

TO BE ELIGIBLE, AN APPLICANT **MUST BE** AN ENROLLED MEMBER OR DESCENDENT OF AN **MIEA** TRIBE

Section 1 - High School or G.E.D.

Section 2 - College or Trade School

### STUDENT'S NAME

\_\_\_\_\_  
*Last* *First* *Middle Initial*

### MAILING ADDRESS

\_\_\_\_\_  
*Street Address* *PO Box*

\_\_\_\_\_  
*City* *State* *Zip code*

(\_\_\_\_\_) \_\_\_\_\_  
*Telephone Number* *E-Mail*

### FATHER'S NAME

\_\_\_\_\_ **MOTHER'S NAME** \_\_\_\_\_

### MAILING ADDRESS

\_\_\_\_\_  
*Street Address* *PO Box*

\_\_\_\_\_  
*City* *State* *Zip code*

(\_\_\_\_\_) \_\_\_\_\_  
*Telephone Number*

### CONSTITUENT TRIBE/BAND\*

\* **Proof of Tribal Affiliation: Copy of Tribal Card or Letter of Descendancy from your Tribal Enrollment Department**

IF I AM GRANTED A SCHOLARSHIP AND I WITHDRAW FROM COLLEGE, UNIVERSITY OR TECHNICAL SCHOOL BEFORE THE END OF THE SEMESTER/TERM FOR WHICH I HAVE RECEIVED MONIES FROM THE MIEA SCHOLARSHIP FUND, I HEREBY AGREE THAT I SHALL RETURN ALL SCHOLARSHIP MONIES TO SAID FUND WITHIN THIRTY (30) CALENDAR DAYS OF WITHDRAWING FROM SCHOOL. I UNDERSTAND THAT EXCEPTIONS CAN BE MADE TO THIS POLICY IF I WITHDRAW FROM SCHOOL FOR MEDICAL REASONS OR OTHER EXTENUATING CIRCUMSTANCES. I UNDERSTAND THAT THE SCHOLARSHIP COMMITTEE WILL MAKE THE FINAL DETERMINATION ON THE VALIDITY OF MY REASONS. I AGREE TO INFORM THE SCHOLARSHIP COMMITTEE COORDINATOR, IN WRITING, OF MY DECISION TO WITHDRAW FROM SCHOOL.

\_\_\_\_\_  
*Signature of Student*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Signature of Parent*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Signature of Parent*

\_\_\_\_\_  
*Date*

IN COMPLIANCE WITH PUBLIC LAW 93-380, 93<sup>RD</sup> CONGRESS, H.R. 69, 21 AUGUST 1974, FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT, THE HIGH SCHOOL, COLLEGE, UNIVERSITY OR TRADE SCHOOL HAS MY PERMISSION TO RELEASE A COPY OF MY GRADE TRANSCRIPT TO BE MADE A PART OF THIS SCHOLARSHIP APPLICATION FOR REVIEW BY THE M.I.E.A. SCHOLARSHIP COMMITTEE.

\_\_\_\_\_  
*Signature of Student*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Signature of Parent*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Signature of Parent*

\_\_\_\_\_  
*Date*

**AN \* THROUGHOUT THE APPLICATION SIGNIFIES THE NEED FOR YOU TO SEND THE REQUIRED SUPPORTING DOCUMENTATION.**

\* **PLEASE INCLUDE THIS APPLICATION WITH TWO (2) CURRENT LETTERS OF REFERENCE NOT RELATED TO YOU, ADDRESSED TO MIEA.**

**\*\*\*FILL OUT ONLY THE SECTION THAT APPLIES TO YOU\*\*\***

**SECTION 1 IF YOU HOLD A G.E.D. CERTIFICATE OR ARE A GRADUATING HIGH SCHOOL STUDENT**

\* G.E.D. Students must attach a Copy of Their G.E.D. Certificate.

**GRADUATING HIGH SCHOOL STUDENT ONLY**

What is your Grade Point Average (GPA) for your senior year? \_\_\_\_\_

\* Attach Transcript of GPA

What is your graduating high school ranking? \_\_\_\_\_ out of \_\_\_\_\_

**G.E.D. STUDENTS AND GRADUATING HIGH SCHOOL STUDENTS  
MUST COMPLETE THE REST OF THIS SECTION.**

What college, university, or technical school do you plan to attend?

\_\_\_\_\_  
*Name of Institution*

\_\_\_\_\_  
*City*

\_\_\_\_\_  
*State*

Have you received a Letter of Acceptance at this Institution?  Yes  No

\* Attach Copy of Letter of Acceptance

PLEASE LIST STUDENT ORGANIZATIONS YOU HAVE BEEN A MEMBER OF:

PLEASE LIST THE OFFICES YOU HAVE HELD IN ANY OF THESE STUDENT ORGANIZATIONS:

PLEASE LIST ANY EXTRACURRICULAR ACTIVITIES YOU HAVE BEEN ACTIVE IN:

PLEASE LIST ANY COMMUNITY ORGANIZATIONS, CLUBS, OR SERVICE GROUPS THAT YOU HAVE BEEN ACTIVE IN:

WHAT DEGREE OR CERTIFICATION DO YOU PLAN ON EARNING AT THE COLLEGE, UNIVERSITY, OR TECHNICAL SCHOOL?

PLEASE DESCRIBE BRIEFLY YOUR CAREER PLANS AFTER YOU EARN YOUR DEGREE OR CERTIFICATION:

PLEASE LIST ANY AND ALL OTHER SCHOLARSHIPS AND/OR GRANTS WHICH YOU HAVE BEEN AWARDED AND LIST THE AMOUNT OF MONEY AWARDED FROM EACH:

PLEASE LIST THE TYPES OF JOBS, IF ANY, YOU WORKED AT DURING YOUR JUNIOR AND SENIOR YEARS, INCLUDING SUMMER JOBS:

PLEASE LIST ANY ACADEMIC HONORS YOU HAVE RECEIVED:

PLEASE GIVE YOUR REASON(S) WHY YOU HAVE APPLIED FOR THIS SCHOLARSHIP, AND WHY YOU THINK IT SHOULD BE AWARDED TO YOU:

**PLEASE NOTE:**

- For this to be a valid application qualifying you to be considered for one of the scholarships, you **must:**
  - complete Page 1;
  - complete all questions/requests in the section that applies to you (Section 1 or Section 2); and
  - provide all the requested supporting documentation marked by an “\*” and highlighted in yellow
- Your complete application along with the required supporting documentation **MUST BE RECEIVED OR POSTMARKED** by the Scholarship Coordinator no later than **June 15, 2026**.
- **NO ONLINE APPLICATIONS ACCEPTED.**

**MAIL TO:**

Delores Wonageshik, Coordinator  
M.I.E.A. Scholarship Committee  
13905 Indian Rd.  
Kewadin, MI 49648

**\*\*\*FILL OUT ONLY THE SECTION THAT APPLIES TO YOU\*\*\***

**SECTION 2 IF YOU ARE A CURRENT COLLEGE, UNIVERSITY OR TRADE SCHOOL STUDENT**

PLEASE LIST THE NAME AND LOCATION OF THE COLLEGE, UNIVERSITY, OR TRADE SCHOOL AT WHICH YOU ARE ENROLLED:

\_\_\_\_\_

*Name of Institution*

\_\_\_\_\_

*City*

\_\_\_\_\_

*State*

\* **Attach Proof of Enrollment**

WHAT ACADEMIC MAJOR OR TRADE CERTIFICATION ARE YOU PURSUING?

WHAT IS YOUR ACCUMULATIVE GRADE POINT AVERAGE (GPA)? \_\_\_\_\_

\* **Attach Transcript showing grades from last semester or term attended.**

PLEASE LIST ANY AND ALL OTHER SCHOLARSHIPS AND/OR GRANTS WHICH YOU HAVE BEEN AWARDED AND LIST THE AMOUNT OF MONEY RECEIVED FROM EACH:

PLEASE DESCRIBE BRIEFLY YOUR CAREER PLANS AFTER YOU EARN YOUR DEGREE OR CERTIFICATION:

PLEASE LIST THE TYPES OF JOBS, IF ANY, THAT YOU WORKED AT DURING YOUR COLLEGE, UNIVERSITY, OR TRADE SCHOOL YEARS, INCLUDING SUMMER JOBS:

PLEASE GIVE YOUR REASONS WHY YOU HAVE APPLIED FOR THIS SCHOLARSHIP AND WHY YOU THINK IT SHOULD BE GIVEN TO YOU:

**PLEASE NOTE:**

- For this to be a valid application qualifying you to be considered for one of the scholarships, you **must**:
  - complete Page 1;
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