

**TRIBAL COLLEGES & UNIVERSITIES GRANT APPLICATION FORM**  
25CFR 41.8, Public Law 95-471 (as amended)

Information and General Instructions: **The application is due annually on or before June 1<sup>st</sup>.** This information is collected to meet the reporting requirements. Response to this request is required by Public Law 95-471, as amended. The information collected is subject to the Paperwork Reduction Act. An agency may not request nor sponsor, and a person need not answer, a request for information that does not contain a valid OMB control number. A response to this request is required to obtain or retain a benefit and no action may be taken against the institution's refusal to supply the information if there is no valid OMB Control Number. The public reporting burden for this form is estimated to average six hours per response, including the time for reviewing instructions, gathering and maintaining data, and completing and reviewing this form. Send comments regarding the burden estimate or any other aspect of this form to the Bureau ICCO, 625 Herndon Parkway, Herndon, VA 20170.

\_\_\_\_\_  
Name of College or University \_\_\_\_\_  
IRS No.

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
Accreditation By \_\_\_\_\_  
Accreditation Type \_\_\_\_\_  
Approving Organization

**BOARD OF DIRECTORS**

We, the Board of Directors, declare the institution does not deny admission to any Indian student based upon the criteria and definitions set forth in 25 CFR 41.11; nor do we waive the requirements of 25 CFR41.

Chairperson \_\_\_\_\_ Member \_\_\_\_\_

Vice Chair \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Number of College governing board: Indian \_\_\_\_\_ Non-Indian: \_\_\_\_\_

Indian Student Count (ISC) for the previous academic term:

Summer ISC: \_\_\_\_\_ Fall ISC: \_\_\_\_\_ Winter ISC: \_\_\_\_\_ Spring ISC: \_\_\_\_\_

ENROLLMENT INFORMATION: Degrees Granted

Master Arts/Master Science _____	Average Class Size _____
Bachelor Arts/Science _____	No. of Instructors _____
Associate Arts/Science _____	FTE Instructors _____
Two Year Certificate _____	PTE Instructors _____

I hereby certify the information contained within this application is complete and accurate.

_____	_____
Chairman of the Board	Date

_____	_____
Institution's President	Date

I hereby certify that \_\_\_\_\_ has met all of the eligibility requirements for continued funding authorized by Public Law 95-471, as amended.  
Name of Institution

_____	_____
Director, Office of Indian Education Programs	Date

_____	_____
Chief, Division of Contracts & Grants Administration	Date

REQUIRED ATTACHMENTS:

1. A proposed budget showing total expected operating expenses in the following education categories: (a) Personnel, (b) Instruction, (c) Administration, (d) Other, and (e) Total. The total expected revenues from all sources for the academic year.
2. A copy of the institution's policy statement, Charter, By-Laws, and catalog which includes a copy of the institution's current curriculum, or other document wherein is found the goals, philosophy or plan of operation to meet the needs of Indian students.
3. A description of the accounting procedures used for grants received under Pub. L. 95-471.