



Cowlitz Indian Tribe Tuition Assistance Award - Application

2026-27 Academic Year- May 1, 2026 through April 30, 2027

Tuition and tuition related fees are awarded under the Tribal General Welfare Exclusion Act of 2014 to enrolled Cowlitz tribal members attending an accredited vocational school, college, or university.

- Award funds must be used in the **2026-27** academic year for Tuition and Tuition related fees.
- Applications are approved and funds are awarded in the order received.
- Payment of the award is made to the school each quarter/semester/education term
- All award recipients must submit a copy of their grades at the end of each Cowlitz funded term.

E-mail your completed application and required documents to tuitionassistance@cowlitz.org

An incomplete application packet is not eligible for consideration and will be returned via e-mail.

Contacts: Melanie Mariano 360-353-9497 - Amanda Fitzpatrick 360-575-6224 and Carol Burnison 360-353-9588

Required Documents:

- ◇ Application.
- ◇ Education Goals Form.
- ◇ Copy of your Cowlitz Tribal Identification Card.
- ◇ Transcript- Unofficial transcripts meet this requirement. High school transcript for graduating seniors. Or a GED Certificate or most recent College transcript for all other applicants.
- ◇ Copy of 2026-27 FAFSA Submission Summary showing Pell grant eligibility and SAI number

Date: _____

Name: _____ Cowlitz Tribal Enrollment Number: _____

Birthdate: _____

Address (Street or PO Box, City, State, Zip Code), _____

Phone Number: _____ E-Mail (All communication will be to this e-mail address): _____

Mark all categories that describe you:

- | | | |
|--|---|--|
| <input type="radio"/> Vocational Student | <input type="radio"/> Undergraduate Student | <input type="radio"/> Graduate Student |
| <input type="radio"/> Part-Time Student | <input type="radio"/> Full-Time Student | <input type="radio"/> Past recipient of a Cowlitz Scholarship/Tuition Assistance Award |

Vocational school, college, or university you will attend. If undecided, List all the schools you are considering.

I am requesting tuition and tuition related fees for the **2026-27** academic year in the following amount. Mark one.

- | | | |
|---|---|--|
| <input type="radio"/> Up to \$13,000 - Vocational Certificate | <input type="radio"/> Up to \$7,000 - Associate Degree | <input type="radio"/> Up to \$14,000 - Bachelor Degree |
| <input type="radio"/> Up to \$21,000 - Master Degree | <input type="radio"/> Up to \$21,000 - Doctorate Degree | |

By accepting this award, I confirm I have reviewed the Instructions and the Policies and Procedures of the Cowlitz Tuition Assistance Award Program and agree to comply with them.

I agree to respond to all e-mails from the Cowlitz Tuition Assistance Office.

I agree all funds will be used in the academic year requested for tuition and tuition related fees.

I agree all refunds and unused funds of this Cowlitz Tuition Assistance Award will be returned to the Tribe.

I authorize the Cowlitz Indian Tribe interoffice use of my personal information.

I certify all the information I have submitted is true and correct.

Signature

Date

January 27, 2026



Cowlitz Indian Tribe
Tuition Assistance Award - Educational Goals
2026-27 Academic Year - May 1, 2026 through April 30, 2027

Date: _____

Name: _____ Cowlitz Tribal Enrollment Number: _____

Will you be attending on-line, in person or both?

Month I will begin my **2026-27** academic year _____

Month and Year or Quarter, Semester (Summer, Fall, Winter, Spring) or Education Term

☐ Vocational Student **OR** College/University: ☐ Freshman ☐ Sophomore ☐ Junior ☐ Senior ☐ Graduate Student

Certificate program or degree you are enrolled in:

☐ Vocational Certificate ☐ Associate Degree ☐ Bachelor Degree ☐ Master Degree ☐ Doctorate Degree

Vocational Certificate: _____

Anticipated Date of Completion

Month/Year: _____

Associate or Bachelor Degree (if undecided, write "undecided"):

Anticipated Date of Graduation

Degree: _____ Major: _____

Month/Year: _____

Master or Doctorate Degree: _____

Anticipated Date of Graduation

Graduate Program or Department: _____

Month/Year: _____

Responding to the prompt below; submit an original essay - 150 words or less.

First-time applicant: Introduce yourself to your Cowlitz family. Include your educational and career goals and how this award will help you achieve your goals.

Previous recipient of this award: Provide an update on the progress you have made toward achieving your education goals.

January 27, 2026