



San Carlos Apache Tribe Education Department Summer Enrichment Program

June 23 - July 31 | SCAT ED College and Career Center

We invite all 9th – 12th-grade students to apply for our 2025 Summer Enrichment Program! During this program, students will have the opportunity to spend a week participating in fun educational activities and post high school readiness workshops!

Submission Requirements:

- Complete Summer Enrichment Program Application, W-9 Form, and Vendor Application
- Bring in SCAT CIB or ID (We will need to make a copy to have on file)
- Acknowledgement of Stipend

In order to apply, you must:

- Incoming 9th – 12th grade student (2025-2026 School Year)
- Have transportation to and from the College and Career Center
- Have a current SCAT Certificate of Indian Blood (CIB) or SCAT Tribal ID
- Any student can apply, but priority will go to students who have not had a chance to participate in the program yet.

Application Due: May 30



San Carlos Apache Tribe Education Department Summer Enrichment Program 2025 Application

I. APPLICANT INFORMATION Please type or print clearly and use your full legal name.

First Name	Middle Name	Last Name	
I am a past participant of the Summer Enrichment Program. <input type="checkbox"/> No <input type="checkbox"/> Yes If so, please list which year:			
I am a GEAR UP student. <input type="checkbox"/> No <input type="checkbox"/> Yes			
Grade Level for Fall 2025 <input type="checkbox"/> 9th <input type="checkbox"/> 10th <input type="checkbox"/> 11th <input type="checkbox"/> 12th		Expected HS graduation year: Current GPA:	
Current School Name: (Use full name. Ex: North High School)		Current School District Name: (If charter or private, write "charter" or "private")	
Student E-mail address		Student Cell Phone (if applicable): () -	
Address			
City		County	State Zip
Birth date (mm/dd/yyyy) / /			
T-Shirt Size (Adult-Unisex): <input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large <input type="checkbox"/> X Large <input type="checkbox"/> XX Large Other:			
Gender <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other		Students must attend the full day (9am-3pm) on the week they are assigned in order to receive a full stipend, and have transportation to and from the College and Career Center. <input type="checkbox"/> I understand	
Preferred week to attend? (Not guaranteed, please let us know in the comments below if you have a prior engagement and need a certain week) <input type="checkbox"/> Week 1 (6/23-6/26) <input type="checkbox"/> Week 2 (7/7-7/10) <input type="checkbox"/> Week 3 (7/14-7/17) <input type="checkbox"/> Week 4 (7/21-7/24) <input type="checkbox"/> Week 5 (7/28-7/31)			
Comments			

II. PHOTO RELEASE

(MY CHILD) _____ HAS PERMISSION TO BE PHOTOGRAPHED, VIDEOED, AND RECORDED FOR PATHWAY TO COLLEGE EDUCATIONAL AND PROMOTIONAL REGARDING THE SAN CARLOS HIGHER EDUCATION DEPARTMENT. I UNDERSTAND THAT THE IMAGES MAY BE USED IN PRINT PUBLICATIONS, ONLINE PUBLICATIONS, PRESENTATIONS, WEBSITES, AND SOCIAL MEDIA REGARDING THE SAN CARLOS EDUCATION DEPARTMENT AND PATHWAY TO COLLEGE PROGRAMS

III. PARENT INFORMATION

Parent #1/Guardian First Name:		Last Name:		Relationship to you:	
Home Phone () -		Work Phone () -			
Home Address:					
City, State and ZIP Code:					
Cell Phone () -			E-mail Address		
Parent #2/Guardian First Name:		Last Name:		Relationship to you:	
Home Phone ()		Work Phone () -			
Home Address:					
City, State and ZIP Code:					



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Cell Phone: () -	E-mail Address:
Preferred phone number for program communication: () -	
Preferred email address for program communication:	

IV. EMERGENCY CONTACT Please type or print clearly.

Emergency Contact Name:	Emergency Contact Phone number:
Emergency Contact relationship to student?	
List any food allergies student has?	

V. APPLICATION ACKNOWLEDGEMENT Please type or print clearly.

Applicant Information

Read through the following checklist and acknowledge that you (both the applicant and parent/guardian) understand the information as stated below by checking each item.

A. Acknowledgement by Applicant

Please check each item below and sign this form. Not doing so will result in an incomplete application submission.

- ☐ By submitting this paper application, applicant agrees to the following statements/conditions: I hereby release Pathway to College, its employees, agents and volunteers, from any and all liability, claims, demands, causes of action and possible causes of action whatsoever arising out of or related to any loss, damage or injury (including death) that may be sustained by my child while participating in or traveling to and from this event. I agree to accept full responsibility, financially or otherwise, for any damage my child may do to the property of Pathway to College, properties visited on outing, other's personal property, or vehicles used for transportation. Disrespectful behavior to any of the Education Department staff, students, presenters will not be tolerated while attending the program. If this happens, the offending student will be asked to exit the program.

I understand and accept the conditions listed above.

Signature	Date
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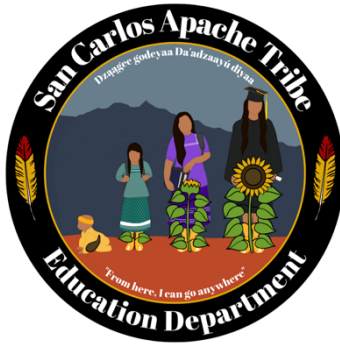
B. Acknowledgement by Parent or Guardian

Please check each item below and sign this form. Not doing so will result in an incomplete application submission.

- ☐ By submitting this paper application, applicant agrees to the following statements/conditions: I hereby release Pathway to College, its employees, agents and volunteers, from any and all liability, claims, demands, causes of action and possible causes of action whatsoever arising out of or related to any loss, damage or injury (including death) that may be sustained by my child while participating in or traveling to and from this event. I agree to accept full responsibility, financially or otherwise, for any damage my child may do to the property of Pathway to College, properties visited on outing, other's personal property, or vehicles used for transportation. Disrespectful behavior to any of the Education Department staff, students, presenters will not be tolerated while attending the program. If this happens, the offending student will be asked to exit the program.

I understand and accept the conditions listed above.

Parent/Guardian First Name:	Last Name:
Signature	Date



Stipend Requirements Acknowledgement

Thank you for your interest in the Pathway to College Summer Enrichment Program! We hope you are excited for a week filled with fun educational activities and post high school readiness workshops! In past years, the Pathway to College Summer Enrichment Program has included a variety of engaging and informative activities to help students explore their futures. Students participate in workshops on post-high school pathways (college, vocational school, entering the workforce, etc.), resume building and other career skills, as well as tours of local businesses and colleges such as Arizona State University or the University of Arizona. The program will also feature a day focused on teaching San Carlos Apache cultural knowledge. Throughout the week, students will hear from inspiring guest speakers and end the program by presenting what they've learned.

In past years, students have received a stipend for participating in the program. While the exact amount for this year has not yet been determined, we want to share some important information about stipend eligibility before you apply. To receive the full stipend, students must attend all scheduled activities during their selected week of the program (Monday through Thursday). Stipends are only provided for days attended. If a student misses a day, they will not be eligible for the full stipend. If you already know that a certain week will not work for you due to prior commitments, please let us know as soon as possible. This will help us place you in a week that fits your schedule and ensures you can fully participate and receive your stipend. Please sign below to acknowledge you have read and understand the information provided.

Student/Participant Signature: _____

Parent or Guardian Signature: _____