

**STUDENT HOUSING ASSISTANCE**



**FY2024**

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**SELDOVIA VILLAGE TRIBE HOUSING PROGRAM**

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**Student Housing Assistance Program**

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## STUDENT HOUSING ASSISTANCE PROGRAM GUIDELINES

The Seldovia Village Tribe has a limited amount of funding available for low-income college students who may need assistance with housing costs. The Student Housing Assistance Program may be used to pay for a portion of rent while attending college.

**TERMS**

* Up to $ per semester. Maximum total amount of assistance under this program shall not exceed $ per recipient, per year.
* Assistance may be provided for a period of no more than 4 consecutive years.
* No repayment is required for recipients who reside in Alaska within 6 months after graduation.
* Recipients who reside outside of Alaska within 6 months after graduation may be required to repay 50% of their total assistance amount
* Funds will be disbursed directly to the university or landlord
* Applicant must provide a copy of the **signed** rental/lease agreement

**ELIGIBILITY REQUIREMENTS**

* Student’s total household income (parents/guardian/self) may not exceed 80%

of the current Federal Median Income guidelines for the Kenai Peninsula.

* Student or parents must be a tribal member of Seldovia Village Tribe or an enrolled Alaska Native/American Indian
* Student and parent’s primary residence must be in Seldovia, Alaska
* Student must attend an accredited university or vocational institution
* Must be a full-time student- minimum of ***twelve (12)*** credits - OR –
* Part-time students- minimum of ***nine (9)*** credits – may be eligible for 50% of the maximum assistance
* Minimum GPA for eligibility is 2.0
* Additional assistance available for full-time summer semester

**SCHOOL APPLICATION DEADLINE:**

## REQUIRED DOCUMENTS CHECKLIST

**Please Provide All Information Below**

**APPLICATIONS WILL NOT BE STARTED UNTIL ALL INFORMATION IS PROVIDED**

* Completed Student Information Form
* Completed Student Budget Form
* Signed Student Agreement Form
* NAHASDA Housing Assistance Application *(short form)*
* Student (and parent’s) most recent Income Tax Return and/ or current pay stubs

(*must include parent’s tax return if they claim you as a dependent*)

* Letter stating need for rental assistance
* Copy of Tribal Enrollment Card/Certificate of Degree of Indian Blood
* Certificate of enrollment or letter of acceptance
* Copy of transcripts indicating GPA of 2.0 or greater
* Verification of full-time or part-time enrollment
* Copy of rental agreement (*please have name of landlord, phone number & address legible*)

|  |  |
| --- | --- |
| Seldovia Village Tribe will not process your request until the application *(All documents listed above)* is 100% complete. Incomplete or unsigned applications will delay the process. Application information must be verified correct by parent or legal guardian. If you have any questions, please contact Honeybee Nordenson at Seldovia Village Tribe Housing Office (907) 435-3260 OR [hnordenson@svt.org](mailto:hnordenson@svt.org) | |
| **Mail completed Applications to:**  Seldovia Village Tribe Housing Office  P.O. Drawer L Seldovia AK 99663 | **Fax completed Applications to:**  (907) 234-7865 Attn: Honeybee Nordenson |

**STUDENT INFORMATION**

STUDENT NAME:

*Last First Middle*

ADDRESS AT SCHOOL:

*Street or PO Box City State Zip Code*

PERMANENT ADDRESS:

*Sttreet or PO Box City State Zip Code*

TELEPHONE NO.: EMAIL:

*Contact Phone*

FATHER'S NAME:

Last First Middle

MOTHER'S NAME:

Last First Middle

DATE OF BIRTH: SOCIAL SECURITY NO.:

NAME OF SCHOOL:

SCHOOL ADDRESS:

*Street or PO Box. City State Zip Code*

LANDLORD'S NAME: PHONE NO.:

LANDLORD'S ADDRESS:

*Street or PO Box City State Zip Code*

*Student Signature Date*

*Parent/Guardian Signature Date*

## FINANCIAL RESOURCES & BUDGET WORKSHEET

**Please fill in the worksheet below, listing all items that apply. The amount should be for the entire school year**

|  |  |  |  |
| --- | --- | --- | --- |
| **RESOURCES** |  | **BUDGET** |  |
| Perkins Loan |  | Tuition |  |
| State Loan |  | Fees |  |
| Other Loan |  | Books |  |
| Corporation Grant- |  | Supplies |  |
| Corporation Grant |  | Room |  |
| Gov’t Aid (Assistance) |  | Board |  |
| SEOG |  | Transportation: Car/Bus |  |
| Pell Grant |  | Transportation: Airfare |  |
| College Scholarship |  | Child Care: |  |
| State Grant |  | Personal Expenses |  |
| ANB/ANS Grant |  | Other |  |
| Veteran’s Benefit |  | Other |  |
| Parent Contribution |  |  |  |
| Student Contribution |  |  |  |
| Spouse Contribution |  |  |  |
| College Work Study |  |  |  |
| Tuition Exemption |  | **TOTAL COLLEGE BUDGET** | **$** |
| Other-CCTHITA |  |  |  |
| Other-Housing Scholarship |  | **(-) TOTAL RESOURCES** | **$** |
| Other |  |  |  |
| **TOTAL RESOURCES** | **$** | **TOTAL REMAINING NEED** | **$** |

#### I have read and supplied the above information and understand that providing false information will disqualify me and can result in legal action.

*Student Signature Date*

*Parent/Guardian Signature Date*

**STUDENT AGREEMENT & CERTIFICATION FORM**

PLEASE READ THE FOLLOWING STATEMENTS AND SIGN BELOW

I hereby declare that the preceding Financial Resources & Budget Worksheet information is accurate and complete to the best of my knowledge, and is submitted for the purpose of obtaining student housing rental assistance from the Seldovia Village Tribe Housing Program. It is understood that upon presentation, this application becomes the property of the Seldovia Village Tribe Housing Office.

The applicant agrees that should any of the above information change the applicant will notify this office of these changes before final agreements are signed between the applicant and this office.

**At the completion of each term you must provide the following to the Seldovia Village Tribe Housing Office:**

1. **​An official set of transcripts indicating the number of credits and cumulative GPA, and**
2. **Confirmation of spring enrollment**

**A minimum cumulative GPA of 2.0 must be maintained to receive the following semester funding. Spring semester funding will not be issued until these documents are received by the Seldovia Village Tribe Housing Office.**

#### I understand that all funds received for housing assistance must be reimbursed to the Seldovia Village Tribe Housing Office on behalf of the Tribe if I do not complete the semester. I also understand that if I reside outside of Alaska for more than 6 months after graduation that I will be required to repay 50% of the total amount of assistance I received under this program.

PENALTY FOR FALSE OR FRAUDULENT STATEMENTS; U.S.C., TITLE 18, SECTION

1001 provides that:

#### “Whoever, in any matter within the jurisdiction of any department or agency of the United States knowingly and willfully falsifies…or makes any false, fictitious or fraudulent statements or representation, or makes or uses any false writing or documents knowing the same to contain any false, fictitious or fraudulent statement or entry, shall be fined not

#### more than $10,000.00 or imprisoned not more than (5) five years, or both.”

*Student Signature Date*

*Application received by: Application approved by: Housing Coordinator Date President/CEO Date*

### SVT PROGRAM APPLICATION

**APPLICANT INFORMATION**

**SVT PROGRAM APPLYING FOR: AMOUNT REQUESTED:**

**DATE: BIRTHDATE:**

|  |  |  |
| --- | --- | --- |
| **FULL NAME:** |  |  |
| *Last* | *First* | *Other Names Used* |
| **ADDRESS:** | | |
| *Street Address* |  | *Apartment/Unit #* |
| *Mailing Address* |  |  |
| *City* | *State* | *ZIP Code* |

|  |  |
| --- | --- |
| **TELEPHONE NO.:** | **EMAIL:** |
| **SOCIAL SECURITY NO.:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **DRIVER’S LIC. State & Number:** |
| **EMPLOY**  **EMPLOYER:** | **YMENT**  **MONTHLY GROSS $:** |
| **TELEPHONE NO.:** | **EMAIL:** |

**LIST OTHER HOUSEHOLD MEMBERS**

#### Birthdate: Birthdate: Birthdate: Birthdate: Birthdate: Birthdate:

## INCOME SOURCES

#### Total amount received by each household member for each type of income.

#### Verification must be provided before your application is approved.

|  |  |  |
| --- | --- | --- |
| **TYPE of Income Received** | **30 Day Amount** | **12 Month Amount** |
| Employment Income |  |  |
| Unemployment Benefits |  |  |
| Retirement/Disability Benefits |  |  |
| SSA Social Security Income |  |  |
| SSI Supplemental Security Income |  |  |
| TAN / ATAP |  |  |
| General Assistance / APA |  |  |
| Child Support |  |  |
| Food Stamps Received |  |  |
| Alaska Permanent Fund |  |  |
| Native Corporation Dividends |  |  |
| VA Payments |  |  |
| Other |  |  |
| **TOTALS:** | | |

**MONTHLY EXPENSES**

#### Please fill in average monthly amounts

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Household Expense** | **Amount** |  | **Miscellaneous Expenses** | **Amount** |
| House Payment/Rent |  | Car Payment |  |
| Electricity |  | Car Insurance |  |
| Heating |  | Groceries |  |
| Phone (Base Charge) |  | Child Care |  |
| Home Insurance |  | Other |  |
| Other |  | Other |  |
| Other |  | Other |  |
| **TOTALS:** | | | | |

#### HAVE YOU PREVIOUSLY RECEIVED ASSISTANCE FROM SELDOVIA VILLAGE TRIBE? YES NO

#### IF YES, WHAT TYPE OF ASSISTANCE AND WHEN?

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Seldovia Village Tribe \*\*\*\*\* Housing Program Coordinator, Honeybee Nordenson \*\*\*\*\* 907-435-3260

# FY2024 NAHASDA INCOME LIMITS FOR ALASKA

Alaska Median Family Income $106,900 [four people]

**Effective 07/07/2023**

**You must be at or UNDER the 80% Median Income to qualify for this Program Homeowners Assistance Fund is 150% Median 2022 Income**

**80%**

**AK Median**

**HAF limit**

|  |  |  |  |
| --- | --- | --- | --- |
| **1-Person Household:** | **$74,850** | **$59,850** | **$103,350** |
| **2-Person Household:** | **$85,500** | **$68,400** | **$118,100** |
| **3-Person Household:** | **$96,200** | **$77,000** | **$132,850** |
| **4-Person Household:** | **$106,900** | **$85,500** | **$147,600** |
| **5-Person Household:** | **$115,450** | **$92,350** | **$159.450** |
| **6-Person Household:** | **$124,000** | **$99,200** | **$171,250** |
| **7-Person Household:** | **$132,550** | **$106,050** | **$183.050** |
| **8-Person Household:** | **$141,100** | **$112,900** | **$194,850** |



**SVT Housing Programs**

Housing Down Payment Assistance

Housing Weatherization/Modernization/Rehabilitation Assistance Tenant Rental Assistance

Housing Assistance for College / Vocational Training Housing Emergency Assistance

/Users/hnordenson/incomeguidelines/FY2024AKIncomeLimits80andHAF 28July2023