Squaxin Island Tribe Memorandum of Commitment

Quarter	Year
Z	

	Island Tribal Education Department has auth	orized a check in the amou	nt of
\$	to be issued directly to		
	e mentioned quarter/semester. I understand		
	ipon how many credits I am enrolled in, less t		ı part-time.
I		ersigned, hereby agree to:	
Please read	d and initial all boxes.		
	I have read and understand the Squaxi	in Island Higher Education	on
	Program Policies and Procedures in its		
	immediately inform TLC of address, email or		,
	I will reimburse the Squaxin Island Tribe f	for the entire amount of the	check if I
	do not complete the following quarter of co		
	is based on full-time/part-time status and th		
	Withdrawing/dropping from a class will affect		
	receive, and I will be required to reimburse	the Squaxin Island Tribe the	e cost of
	tuition, books, and class fees for the class I	withdraw from.	
	I understand that it is my responsibility to no	otify the school and the Squ	ıaxin İsland
	Tribe Education Department immediately wh	nen I withdraw/drop any cla	SS.
	I am aware that if I do not withdraw within	the allotted timeframe the s	school has
	given, that I will be responsible for the cost of tuition, books, and class fees		
	associated with that class and/or classes. (s	school calendar attached)	
	I understand that by signing this form I am	agreeing to turn in all reque	ested
	paperwork by the specified dates on the F	ligher Education Calenda	ar:
	(attached). This includes receipts for books		
	completed and signed Memorandum of Com		
	Information Release forms, FAFSA (complete		
	Government), and official class schedule. If		
	above requested information by the due dat	e I will call the Squaxin Isla	nd
	Education Department at (360) 432-3882.		
List Individu	al Classes You are Enrolled in this Quarter:		
LISC ITIGIVIGA	ar classes for the Emolica in this Quarter.		
			_
	nature:		_
Fmail Addre	SS'	Phone:	
Lilian Addic	ss:**Required**	**Required**	
FOR OFFICE USE (DNLY Date Received:	Squaxin Island Tribe	Form #109