

## COURSE COMPLETION INCENTIVE REQUEST

<b>Date of Request</b>		
<b>Name</b>	<b>Enrollment Number</b>	
<b>Telephone</b>	<b>Email</b>	
<b>Mailing Address</b>		
<b>City</b>	<b>State</b>	<b>Zip</b>
<b>Course Completion Date (quarter, semester, year)</b>		
<b>Name of Post-Secondary Education Institution</b>		

**Signature**

**Date**

### INSTRUCTIONS

- Provide a copy of the transcript or certificate of completion
- Deliver a completed copy of this form with proof of course completion attached to  
**Nancy L. Holland M.A. Director Samish Education Program, PO Box 217,  
Anacortes, WA 98221**

### ELIGIBILITY

- Samish Tribal Member
- Show proof of successful completion of course(s) at the post-secondary level including college
- Limit one request per quarter or semester
- It is the responsibility of the student to submit a complete request for consideration
- Eligible courses include college courses taken for credit, audit, or clock hours. professional certification courses, workshops, and personal enrichment