



**Salt River  
PIMA-MARICOPA INDIAN COMMUNITY**

10,005 E. Osborn Road, Scottsdale, AZ 85256  
Education Department  
(480) 362-2500



**ACKNOWLEDGEMENT OF RECEIPT OF SRPMIC POST-SECONDARY & ADULT EDUCATION PROGRAM  
HANDBOOK AND AUTHORIZATION FOR DEDUCTION FROM PER CAPITA DISTRIBUTION**

By signing below, I hereby agree that I have received the SRPMIC Post-Secondary & Adult Education Program Handbook which contains Administrative Policy 1-4 Scholarship Guidelines.

Furthermore, I hereby understand that failure to comply with the SRPMIC Post-Secondary & Adult Education Program policies as outlined in Administrative Policy 1-4, Section IV (K) and (L), pertaining to, but not limited to, early termination of school enrollment either by failing to enroll, withdrawal from enrollment or expulsion shall result in a determination that I must repay the funds awarded to me by the SRPMIC Post-Secondary & Adult Education Program.

By signing this Agreement, I hereby acknowledge and agree that any reimbursement of funds I owe to the SRPMIC Post-Secondary & Adult Education Program must be promptly paid in full or action under Administrative Policy 1-4 will be taken to withhold up to one-half of each of my quarterly gaming per capita payments until the SRPMIC Post-Secondary & Adult Education Program is repaid in full.

I hereby understand that under Administrative Policy 1-4, Section IV (R), I have a right to appeal where I believe that this Policy has not been followed in its applicability to me.

I hereby irrevocably assign my gaming per capita payment, as provided for in Administrative Policy 1-4, to the SRPMIC Post-Secondary & Adult Education Program for any reimbursement of funds that I cannot or will not be able to promptly pay.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Print Name: \_\_\_\_\_