



Shakopee Mdewakanton Sioux Community **WÓUNȚPE (EDUCATION) PROGRAM**

PROGRAM INFORMATION

The WóunȚpe (Education) Program is for Native American students who attend an Eastern Carver County Public School and reside in Carver County, Minnesota. This program is funded by the Shakopee Mdewakanton Sioux Community and is solely based on funds available.

Allowable Educational Support Items Include, but Not Limited To:

- School Supplies
- Sports Fees
- Tutoring
- Tech Fees
- Backpack
- Gym/Athletic Shoes
- Testing Fees
- School Fees
- Graduation Cap & Gown
- Driver's Education
- Graphing Calculator

ELIGIBILITY:

- Children from 3 years of age (by December 31) through grade 12
- Enrolled in an **EASTERN CARVER COUNTY PUBLIC SCHOOL**
- Resident of **CARVER COUNTY**
- Student is one of the following:
 - Member or Descendant of a US Federally Recognized Tribe
 - Member or Descendant of a US State Recognized Tribe
 - Member or Descendant of a Canadian Tribe

Application must be renewed every school year to be eligible for funding

PROGRAM CONTACT

Kelsey Scares The Hawk

NAEDUPROGRAMS@SHAKOPEEDAKOTA.ORG

2025-2026 SCHOOL YEAR



Shakopee Mdewakanton Sioux Community **WÓUN SPE (EDUCATION) PROGRAM**

REGISTRATION REQUIREMENTS

NEW STUDENTS

1. Registration Form
2. Birth Certificate for Student
3. Proof of Carver County Residency (one of the following)
 - Utility Bill
 - Bank Statement, Tax Document, Etc.
 - Lease/Mortgage Paperwork
4. Proof of Tribal Enrollment/Descendancy from a US Federally Recognized Tribe, US State Recognized Tribe, or Canadian Tribe:
 - Certificate of Indian Blood (CIB), Tribal Enrollment, or Tribal ID of Student

If student is not enrolled, then one of the following can be submitted:

- Certificate of Indian Blood (CIB) or Tribal ID of enrolled Parent
 - Certificate of Indian Blood (CIB) or Tribal ID of enrolled Grandparent
 - Birth Certificate of Parent required if using Grandparent enrollment
 - Certified Family Tree from Tribe (ONLY FOR 3RD GENERATION OR GREATER)
5. Proof of guardianship, if not a Parent to Student

2025-2026 SCHOOL YEAR



Shakopee Mdewakanton Sioux Community **WÓUN SPE (EDUCATION) PROGRAM**

REGISTRATION FORM Fill Out One Form Per Child (Print legibly)

STUDENT INFORMATION

FULL NAME (LEGAL)			
PREFERRED FIRST NAME		DATE OF BIRTH	
HOME ADDRESS			
EMAIL ADDRESS (11 TH & 12 TH GRADE: IF THEY WANT TO BE SENT COMMUNICATIONS)			

PRIMARY PARENT/GUARDIAN (THE PERSON WHO WILL RECEIVE ALL COMMUNICATIONS AND MAIL)

NAME (FIRST & LAST)			
PHONE #			
EMAIL ADDRESS			
ADDRESS (IF DIFFERENT THAN STUDENT)			
RELATIONSHIP (CIRCLE)	MOTHER	FATHER	OTHER: _____

SECONDARY PARENT/GUARDIAN

NAME (FIRST & LAST)			
PHONE #			
EMAIL ADDRESS			
ADDRESS (IF DIFFERENT THAN STUDENT)			
RELATIONSHIP (CIRCLE)	MOTHER	FATHER	OTHER: _____

2025-2026 SCHOOL YEAR



Shakopee Mdewakanton Sioux Community **WÓUNSPÉ (EDUCATION) PROGRAM**

SCHOOL INFORMATION

STUDENT NAME: _____

GRADE: _____

SCHOOL ENROLLED IN: (CIRCLE)

BLUFF CREEK
ELEMENTARY

CARVER
ELEMENTARY

CHANHASSEN
ELEMENTARY

CLOVER RIDGE
ELEMENTARY

JONATHAN
ELEMENTARY

VICTORIA
ELEMENTARY

CHASKA MIDDLE
SCHOOL EAST

CHASKA MIDDLE
SCHOOL WEST

PIONEER RIDGE
MIDDLE SCHOOL

CHANHASSEN HIGH
SCHOOL

CHASKA HIGH
SCHOOL

LA ACADEMIA &
KINDER ACADEMY

INTEGRATED ARTS
ACADEMY

OTHER

AUTHORIZATION FOR RELEASE OF INFORMATION

By signing below, I give permission to the Shakopee Mdewakanton Sioux Community (SMSC) staff to verify my student's enrollment in an Eastern Carver County School, including attendance, grades, progress reports and transcripts.

All communication between parent/guardian, student, school, and SMSC will be kept strictly confidential. A copy of this document will be given to the school.

PARENT/GUARDIAN NAME

DATE

SIGNATURE

2025-2026 SCHOOL YEAR