University of Maine System Application for Native American Waiver and Scholarship Program

1	2		3	
Name]	Date of Birth	Student ID Nu	mber/EMPLID
4				
Address: Street	City	State	Zip	Telephone
5		6.		
Campus of Acceptance			Date of Accepta	nce
Please complete item 7, 8 OR	9 below:			
7. MEMBER				
I am currently listed on the tribal ce	nsus of the:		Passamaquoddy	Pleasant Point PPP
☐ Indian Township Passamaquodo	dy ITP		Penobscot PEN	
Houlton Band of Maliseet HMA	Δ.		Aroostook Band	l of Micmac AMI
Other tribe/band:			-	
8. If you are applying as an enrolled MicMac or Maliseet Band – have yo	ou lived in Ma			
9. MAINE OR CANADIAN WABA One of my parents or grandpa				MEMBER)
Tribe	located in			
		City		State
Name of parent or grandparent on a	Tribal census:			
I certify the above	e statements to	be correct to the	best of my knowled	ge
Applicant Signature		_	Date	
Please attach official verification of from a tribal member. Documentation				of decadency
For official use only Effective Semester Approved	Not Approv	ed Date		
Program Scholarship Coordinator_				