

CNMI SCHOLARSHIP OFFICE

Caller Box 10007

Saipan, MP 96950

Telephone No.: 670-664-4750

Fax No.: 670-664-4759

www.cnmischolarship.com

Email: cnmieap@cnmischolarship.com

2011-2012 Spring Term Application

Educational Assistance Program (Grant)

PL 14-37 Honors Scholarship Program (Only 2012 high school graduates may apply)

Applicant Status: New ___ Ongoing ___ Returning ___

APPLICANT DATA (Please update our office with your most current address.)

Last:	First:	MI:	Social Security:
Mailing Address:		Citizenship:	
City, State & Zip:			
Gender: <input type="radio"/> Male <input type="radio"/> Female			
Contact No. 1:	Contact No. 2:		
Email Address:			
Active CNMI Voting Affidavit No.:			
Date of Birth:	Birthplace:	Ethnicity:	
Permanent CNMI Address:		Village Residing:	
City, State & Zip:			
Permanent CNMI Resident?			
Have you been residing in the CNMI continuously for the past 2 years (2010 and 2011)? <input type="radio"/> Yes <input type="radio"/> No			
Mother's Name/Address:		Father's Name/Address:	
INSTITUTIONAL INFORMATION			
Name of Institution you plan to attend:		Calendar Year: <input type="radio"/> Semester <input type="radio"/> Quarter	
<input type="radio"/> Onsite <input type="radio"/> Online (online only applies to on island applicants)			
Major/Field of Study:		Class Level: <input type="radio"/> Freshman <input type="radio"/> Sophomore <input type="radio"/> Junior <input type="radio"/> Senior	
Degree Pursuing: <input type="radio"/> Certificate <input type="radio"/> Associates <input type="radio"/> Baccalaureate			
Date of Expected Graduation: ____/____/____ <small>Month Year</small>			
Are you a High School graduate? Circle Yes or No			
Name of High School Attended:		High School Graduation Date:	
OTHER INSTITUTION (S) ATTENDED			
Name of Institution:		Degree Obtained (if any)	Year
1.			
2.			

Please read and sign next page. →

Release of Information

Information provided will be kept confidential. Pls. read and check box for authorization

For the sole purpose of Employment or Financial Opportunities: I am authorizing the Scholarship Office to release my name, mailing address, email, field of study, Institution attending and date of graduation. I further release from any and all liability the Scholarship Office and its agents, representatives, and assignees for furnishing such documents and information to potential financial assistance agencies, employers and their employees, agents, representatives, and assignees for using such documents and information. The Scholarship Office agrees that it will not provide any personal or private information outside of the information it receives as part of this program to anyone.

CERTIFICATION: I certify that all information provided above is true and complete to the best of my knowledge. If requested by an authorized official, I agree to provide proof of information stated on this form. I understand that if I fail to provide documents asked or falsify any information provided, I will not receive financial assistance. I also authorize the Scholarship Office to request and or obtain necessary information from other agencies related to my financial aid application.

Signature of Applicant: _____ Date: _____

For file review or check pick up: Authorized Person 1: _____ Contact No.: _____
 Authorized Person 2: _____ Contact No.: _____

Off-Island applicants only: If approved, would you like us to mail your check? Yes ___ No ___

Educational Assistance Program Requirements

New Applicants	Ongoing Applicants	Returning Applicants
Important: Deadline for application only, is December 15th, 2011. Supporting documents MUST be submitted at the SAME TIME no later than February 28th, 2012.		
__ 2011-2012 Application (only valid for Spring 2012)	__ 2011-2012 Application (not required for Fall 2011 award recipients)	__ 2011-2012 Application (only valid for Spring 2012)
__ Acceptance Letter into US Accredited Institution	__ Acceptance Letter into US Accredited Institution (For transfer students)	__ Acceptance Letter into US Accredited Institution
__ Official Transcript (Most recent)	__ Official Transcript (Most recent)	__ Official Transcript (Most recent showing last term you received an award)
__ Class Schedule for Spring 2012	__ Class Schedule for Spring 2012	__ Class Schedule for Spring 2012
__ Copy of Passport or Birth Certificate	__ Proof that you applied for FAFSA for this 2011-2012 Academic Year..	__ *Proof of CNMI residency for 2010-2011
__ *Proof of CNMI residency for 2010 and 2011	Other documents may be requested	Other documents may be requested

*2010 and 2011 CNMI 1040 (Parents CNMI 1040 ONLY if applicant is being claimed), Employment Verification, Official Transcripts, Voter's Certification Letter, etc.

TIPS

- ➔ Please make copies of all documents you submit. Your copies will be stamped upon submission.
- ➔ Completed and signed applications are reviewed in the order they are received; Applications will not be reviewed unless supporting documents are complete. Supporting documents MUST be submitted at the same time to ensure prompt review of your application package. Our office will no longer be accepting materials via e-mail, unless special circumstances arise.
- ➔ You may pick up the 2011-2012 Memorandum of Agreement/Promissory Note at our office or you may download a copy from our website. Your check will not be released until we have received all requested documents and a completely signed and notarized Memorandum of Agreement/Promissory Note.
- ➔ Please remember, it is very important that you update our office of any changes in contact information or academic status.