QUALIFICATIONS: You may qualify for the American Indian Tuition Waiver if you meet the following criteria:

- You are a resident of the State of Montana (per BOR Policy 940.1) and are attending a MUS qualifying campus.
- You are at least one-quarter (1/4) degree Indian blood; or are an enrolled member of a state or federally recognized Indian tribe which is located within the boundaries of the State of Montana. Accepted documentation as follows: CIB (Certificate of Indian Blood) letter or card; Tribal Enrollment Card; Form letter(s) documenting descendency that equals ¼ or more; and Document of parent (grandparent) enrollment and/or degree of blood.
- You have demonstrated financial need as defined by the Board of Regents Policy 940.13 (F) (4) and verified by completing the Free Application for Federal Student Aid (FAFSA). You must complete and submit the FAFSA each academic year you are requesting this fee waiver.

STATE RECOGNIZED TRIBES LOCATED WITHIN THE BOUNDARIES OF MONTANA:

Little Shell Chippewa Assiniboine Blackfeet Northern Chippewa Cree Pend d'Oreille Salish Cheyenne Crow Gros Ventre

Kootenai Sioux

 $FEDERALLY\ RECOGNIZED\ TRIBES:\ https://www.ncsl.org/research/state-tribal-institute/list-of-federal-and-state-recognized-tribes.aspx\#mt$

LIMITATIONS:

- This waiver does not waive any fees. Payment of fees is the responsibility of the student.
- This waiver cannot be used with other tuition waivers.
- This waiver can only be used towards undergraduate tuition.
- To continue to receive this waiver, you must maintain Satisfactory Academic Progress (SAP) as defined by your campus.

Name:						
	First	Middle		Last		
Address:			City:	State:	Zip:	
Phone:		Email:				
Name of Tribe ((print):					
Tribal Enrollme	nt Number:		_			
Address:			City:	State:	Zip:	
Phone:		Email or Website:				
I certify the info	ormation provided in	n this application is a	ccurate and	complete to the best	of my knowledge.	
Signature		 Date		Social Security	Number or Studer	nt ID

PLEASE SUBMIT THIS FORM AND DOCUMENTATION TO YOUR CAMPUS FINANCIAL AID OFFICE

Once this form is approved/denied, you do not need to complete it again as long as you remain continuously enrolled at this campus and you continue to meet the requirements listed above.

If you have questions, please call 406-449-9131.

PROOF OF INDIAN DESCENT MUST ACCOMPANY THIS FORM