



WAIVER OF NON-RESIDENT TUITION FOR NATIVE AMERICANS

(Must apply each semester)

Date: _____

Student Name: _____

Address: _____

ID Number: _____ Semester: ___ FALL ___ SPRING ___ SUMMER

Do you belong to one of the following Native American tribes? (Please check only one.)

Caddo	___	Cherokee	___	Chickasaw	___	Choctaw	___	Creek	___	Delaware	___
Kickapoo	___	Osage	___	Quapaw	___	Shawnee	___	Tunica	___	Peoria	___

Are you a citizen or member of the above referenced Native American tribe, and is your name shown on the roll of that same Native American's tribal headquarters? () YES () NO

Were you formally a resident of the state of Arkansas for six months or longer before relocation to another state? () YES () NO

DOCUMENTATION IS NEEDED FOR EACH SEMESTER ENROLLED

College Policy 508 allows the above referenced tribal members to enroll and receive the out of state tuition waiver at Cossatot Community College of the University of Arkansas.

In order for CCCUA to be eligible for a tuition adjustment, we ask those Native American students to provide the following documentation:

1. Copy of original tribal citizenship or membership certificate or identification card. (CDIB cards are not proof of citizenship or membership).

Fall hours _____ X _____ = _____

Spring hours _____ X _____ = _____

Summer Hours _____ X _____ = _____

Students receiving UAC waivers must be meeting Federal Financial Aid Satisfactory Academic Progress. Please refer to student handbook and UAC website.

It is the policy of UA Cossatot not to discriminate on the basis of race, color, national origin, sex, age, religion, disability, or other unlawful factors in the admission and treatment of students. UA Cossatot is in compliance with applicable laws and regulations in student and employment recruitment, admission, programs and activities. The ADA Coordinator can be reached by call 870.584.4471 or 1.800.844.4471, or by contacting AR Relay Voiced Services for the Deaf and Hearing Impaired at 1.800.285.1121

Student Signature _____

Date _____

For Financial Aid Use Only

Amount Awarded _____ Awarded Date: _____ Financial Aid Initial _____