



# Cultural Diversity Tuition Waiver Application

Empl ID

FOR INSTITUTIONAL USE ONLY

1. Legal Name \_\_\_\_\_  
LAST FIRST MIDDLE FORMER NAME IF APPLICABLE

2. Mailing Address \_\_\_\_\_  
STREET APT # CITY STATE ZIP

3. Email Address \_\_\_\_\_ Telephone \_\_\_\_\_  
HOME CELL

4. Permanent Address \_\_\_\_\_  
STREET APT # CITY STATE ZIP  
COUNTY COUNTRY

5. Your Birthdate \_\_\_\_\_  
MO DAY YR

6. Name of Parent, Guardian or Spouse \_\_\_\_\_  
LAST FIRST MIDDLE

7. Classification at MSU (check appropriate box):

☐ New Freshmen to MSU ☐ New Transfer to MSU ☐ Returning MSU student ☐ Re-applying to MSU

8. Academic program/major: \_\_\_\_\_

9. Have you attended a North Dakota Tribal College? Yes ☐ No ☐

Tribal College attended \_\_\_\_\_ When attended \_\_\_\_\_ Degree earned \_\_\_\_\_

Reason you are applying for a Cultural Diversity Tuition Waiver

☐ **Enrolled Member** of a federally recognized American Indian Tribe or Alaska Native and Villages  
What is your tribal affiliation? \_\_\_\_\_ ☐ North Dakota ☐ Minnesota ☐ Other \_\_\_\_\_  
**NOTE: Documentation of enrollment must accompany this application.**

☐ **American Indian** who is not an enrolled member but has a direct lineal descent from an enrolled member of a federally recognized American Indian Tribe or Alaska Native and Villages (NOTE: Do not check if you are an enrolled member of a federally recognized tribe.)

☐ **African American/Black** having origins in any of the Black racial groups of Africa

☐ **Hispanic/Latino** having Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origins

☐ **Asian/Pacific Islander** having origins in any of the original peoples of the Far East, Southeast, Indian Subcontinent of the Pacific Islands

☐ **Multiracial/Multiethnic** Please specify \_\_\_\_\_

☐ **Refugee or member of another traditionally underrepresented ethnic group** Please explain \_\_\_\_\_

☐ **Economically disadvantaged** - In order to select this option, the applicant must qualify for the federal Pell Grant.

My signature below certifies that the above information is true and that any false information will result in the loss of the tuition waiver at any time.

SIGNATURE OF APPLICANT

DATE

Please attach a statement about why you should be considered for this waiver.

**PLEASE NOTE: Applicants must file a FAFSA to be considered for a Cultural Diversity Waiver.**

**Return to: Office of Enrollment Services, 330 Third St. NE, Mayville, ND 58257-1299**