

## Application Information

Full name:	<hr/>			Date of Birth:	<hr/>
	<i>Last</i>	<i>First</i>	<i>M.I.</i>		
Address:	<hr/>			Phone:	<hr/>
	<i>Address</i>		<i>Apt/Unit #</i>		
	<i>City</i>	<i>State</i>	<i>Zip Code</i>	Email:	<hr/>
Are you a Tribal Member of one of the Chugach Regional tribes?	Yes	No	If yes, which tribe?	<hr/>	
Do you live in one of the Chugach Regional Communities	Yes	No	If yes, which one?	<hr/>	

## Interests

Please describe your interest in the outdoors, subsistence, field work and/or research.	<div style="border: 1px solid black; height: 100px; width: 100%;"></div>
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## Education

High school:	<hr/>				
From:	<hr/>	To:	<hr/>	Did you graduate?	Yes   No
College:	<hr/>				
From:	<hr/>	To:	<hr/>	Did you graduate?	Yes   No
Other:	<hr/>				
From:	<hr/>	To:	<hr/>	Did you graduate?	Yes   No

Disclaimer: Date of birth is requested only to verify eligibility for this grant-funded program serving Tribal youth ages 16–26 and for required reporting. This information is not used for any other purpose.

I certify that my answers are true and complete to the best of my knowledge.

Signature:	<hr/>	Date:	<hr/>
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