

Tuition Waiver Program Public Servant

2024-2025 Application

PROGRAM ELIGIBILITY INFORMATION

The Tuition Waiver Program (Public Servant) is a state of Maine program for eligible students pursuing a postsecondary degree at a Maine public college or university.

Eligible students must meet one of the following conditions at the time of graduation from high school or upon completion of HiSET/GED or equivalent:

- > The child of an active Maine firefighter, emergency medical services provider, or full-time law enforcement officer killed in the line of duty in Maine, who was under 21 years of age at the time of the parent's death; or
- > The spouse of an active Maine firefighter, emergency medical services provider, or full-time law enforcement officer killed in the line of duty in Maine.

In addition to completing the Tuition Waiver (Public Servant) application, a student must:

- Be a Maine resident
- Have received acceptance into a degree program at a University of Maine campus, a Maine Community College, or Maine Maritime Academy
- Submit all required supplemental forms and documents to FAME
- Submit the 2024-2025 Free Application for Federal Student Aid (FAFSA)

This program is governed by Maine law as set forth in 20-A M.R.S.A. §12551 et seq. and Chapter 608 of the Rules of the Finance Authority of Maine.

INSTRUCTIONS AND REQUIREMENTS

There is no deadline for the Tuition Waiver Program application. Completed applications and required documents **must be submitted directly to FAME via postal mail**. We cannot accept faxed, emailed, or hand-delivered application materials; the application does not need to be sent via expedited mail. The envelope must have the correct postmark date clearly visible and legible; this can be done by having the postmaster hand stamp th envelope with the postmark.

Applicants must:

- Complete the Tuition Waiver Program Application carefully
- Provide proof of acceptance or enrollment in a degree program by submitting one of the following:
 - A copy of your college admissions acceptance letter
 - A letter from your college registrar's office confirming your degree program status
 - A copy of your current college transcript showing your degree program status
- Provide a copy of the death certificate
- Attach legal documentation for one of the following:
 - Child Verifying you are the natural or legally adopted child of the deceased, and that you were less than 21 years of age at the time of death
 - Spouse Verifying you were legally married to the deceased at the time of death
- Submit a notarized statement from a local government official confirming the death occurred in the line of duty
- File the 2024-2025 FAFSA You must submit your FAFSA now as part of this application even though FAFSA processing is delayed until mid-March 2024.

APPLICATION CHECKLIST

- □ Tuition Waiver Program Application
 - Complete pages 2 and 5, and
 - o Read FAME's privacy policy and ✓ the box at the bottom of page 4
- □ Proof of Acceptance or Enrollment in a Degree Program
- □ Copy of Death Certificate
- Proof of Relationship
- □ Notarized statement from local government official
- □ Submitted 2024-2025 FAFSA



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APPLICANT INFORMATION						
Social Security Number	Last Name	First Name MI		MI	Date of Birth	
Home Address (Permanent/Legal) Street		Apt/Unit	City/State/ZIP		,	
Mailing Address (if Different) Street/ PO Box		Apt/Unit	City/State/ZIP			
Home Phone Number	Cell Phone Number	Email Address	ldress			
List the date you filed the 2024-202	5 Free Application for Federal Stude	nt Aid (FAFSA) – ı	mm/dd/yy			
EXPECTED College attending in 2024-2025					Expected Graduation Dat	te
ENROLLMENT PLANS	ENROLLMENT PLANS				(mm/yy)	
DECEASED PERSON'S INI	FORMATION					
Full Name of Deceased Person			Applicant's Relationship to the Deceased			
			Child (Your age at time of death) Spouse			
Employer at Time of Death			Supervisor at Time of Death (Full Name & Title)			
Employer's Address			Supervisor's phone number			
		OR As a Law Enforcement Officer (please check the appliable position)				
		Game Warden				
000115471011	Volunteer Firefighter	County Sheriff State Police				
OCCUPATION OF DECEASED	Municipal Firefighter	Liquor Enforcement				
PERSON	Emergency Medical Services	Marino Patrol				
	Linergency Medical Services	Deputy Sheriff				
		Police				
		Fire Marshall				

FINANCE AUTHORITY OF MAINE PRIVACY POLICY

FACTS	WHAT DOES THE FINANCE AUTHORITY OF MAINE ("FAME") DO WITH YOUR PERSONAL INFORMATION
Why?	Financial companies choose how they share your personal information. Federal law gives consumers the right to limit some but not all sharing. Federal law also requires us to tell you how we collect, share, and protect your personal information. Please read this notice carefully to understand what we do.
What?	The types of personal information we collect and share depend on the product or service you have with us. This information can include: First name and last name Date of birth Date of death Hospital of birth Mailing address Birth mother's name, address, email address, and/or phone number Mobile phone number Email address Social security number, Tax ID number or EIN Employment information (including company name, address, and start date) General financial information (such as annual income and household net worth) Financial statements reflecting assets, income, and liabilities; tax returns Account balances, contribution amounts, investments, and payment history Credit history and credit scores FAFSA filing status and information provided on or related to your FAFSA Information about educational institutions you do or may attend Information on race and/or gender that you may provide.
How?	All financial companies need to share customers' personal information to run their everyday business. In the section below, we list the reasons financial companies can share their customers' personal information; the reasons FAME chooses to share; and whether you can limit this sharing.

Reasons we can share your personal information	Does FAME share?	Can you limit this sharing?
For our everyday business purposes - such as to process your transactions, maintain your account(s), respond to court orders and legal investigations, or report to credit bureaus or government agencies.	Yes	No
For our marketing purposes - to offer our products and services to you	Yes	No
For joint marketing with other financial companies	Yes	No
For our affiliates' everyday business purposes - information about your transactions and experiences	Yes	No
For our affiliates' everyday business purposes - information about your creditworthiness	No	We don't share
For our affiliates to market to you	No	We don't share
For non-affiliates to market to you	Yes	Yes

To limit our sharing	Visit us online: Famemaine.com/privacyoptout OR Mail the form at the end of the privacy notice on the FAME website Please note: If you are a new customer, we can begin sharing your information 30 days from the date we sent this notice. When you are no longer our customer, we continue to share your information as described in this notice. However, you can contact us at any time to limit our sharing.
Questions?	info@famemaine.com

Who we are			
Who is providing this notice?	providing this notice? This notice is provided by The Finance Authority of Maine (FAME)		
What we do			
How does FAME protect my personal information? To protect your information from unauthorized access and use, we use security measures that comply wit law. These measures include computer safeguards and secured files and buildings.			
How does FAME collect my personal information?	 We collect your personal information, for example, when you: give us your contact information give us your information for the purpose of enrolling in a college savings account apply to open a college savings account give us your information for the purpose of obtaining or refinancing a loan, grant, tax credit or loan repayment award seek advice from us We also collect your personal information from others, such as credit bureaus, affiliates, public or government records, or other companies, including the Alfond Scholarship Foundation, Vestwell State Savings, LLC, Merrill Lynch, Pierce, Fenner & Smith, Inc. ("Merrill"), The Bank of New York Mellon, certain lending institutions, and certain educational institutions.		
Why can't I limit all sharing?	Federal law gives you the right to limit only: • sharing for affiliates' everyday business purposes - information about your creditworthiness • affiliates from using your information to market to you • sharing for non-affiliates to market to you State laws and individual companies may give you additional rights to limit sharing.		
What happens when I limit sharing for an account I hold jointly with someone else?	Your choices will apply to everyone on your account-unless you tell us otherwise.		

Definitions			
Affiliates	Companies related by common ownership or control. They can be financial and nonfinancial companies. Our affiliates include FAME Leaders, Inc., and FAME Opportunities, Inc. Companies not related by common ownership or control. They can be financial and nonfinancial companies. Non-affiliates we may share personal information with include: Merrill Lynch, Pierce, Fenner & Smith, Inc. ("Merrill"), Vestwell State Savings, LLC, The Bank of New York Mellon, the Alfond Scholarship Foundation, certain lending institutions, certain educational institutions, state or federal government agencies.		
Non-affiliates			
Joint marketing	A formal agreement between non-affiliated financial companies that together market financial products or services to you.		

Other important information

Information for California, North Dakota, and Vermont Residents: In response to applicable state law, if the mailing address provided for your account is in California, North Dakota, or Vermont, we will automatically treat your account as if you do not want us to disclose your personal information to non-affiliated third parties for purposes of them marketing to you, except as permitted by the applicable state law.

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	l l	I acknowledge that I have read and understood the FAME privacy policy provided here



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APPLICANT	APPLICANT INFORMATION				
Social Security Number (last 4 digits only on this page)		ast Name	First Name	MI Date of Birth	
XXX-XX-	s page)				
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AUTHURIZA	TIONS (OPTIO	NAL)			
I hereby authorize the Finance Authority of Maine (FAME) to discuss my application with the following individuals upon their verification that they are such person and correct reciting of my social security number and date of birth, until written notification from me to the contrary is received by FAME.					
Examples:	First Name	Last Name	Relationship to Applicant	Email or Phone	
Parent					
Guardian Spouse					
Ороссо					
APPLICANT AUTHORIZATION					
Signature of Applicant Date					
APPLICANT SIGNATURE AND CERTIFICATION					
I hereby certify that all of the information set forth on this application, and all materials submitted therewith (collectively, "my information"), is true, correct and complete. I authorize FAME to share my information and information obtained from my high school, college or university regarding my registration, grades and costs of attendance, with FAME's advisory or selection committee(s) and with my school(s) for purposes of processing my application.					
Signature of Applicant Date					