



CNMI Scholarship Office

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PREVIOUS RECIPIENT INFORMATION FORM

Section 1. Personal Information

Name: _____ Social Security No: _____
Mailing Address: _____
Date of Birth: _____ Place of Birth: _____
Marital Status: Single Married Divorce Email Address: _____
*If your name is different from the name we have on file, please provide legal proof such as: Change of Name Decree, Marriage License Copy, etc...

Section 2. Educational Information Are you currently enrolled? Yes or No
If you answered yes, you must submit your official transcript and proof of enrollment. Graduates are required to submit a copy of their diploma.

List **ALL** Colleges/University attended, dates, and degree obtained, starting with the most recent:

Institution	Years attended	Degree Obtained
1.		
2.		
3.		
4.		

Section 3. Current Employment Information

Please attach a listing of your employment history from the date of graduation or non-enrollment. If you've been rejected from employment, you are required to provide a copy of your rejection letters.

Are you currently employed:

Name of Employer:

Mailing Address:

Start Date of Employment: _____ Contract Expiration Date: _____

Job Status: () Permanent () Contract () Other:

Length of Employment: _____ Years: _____ Months: _____

Certified By:

Print and Sign _____ Date: _____

Section 4. Payment Agreement Plan for those in default (To be completed by Compliance and Repayment Officer)

Payment will be made on: EAP Grant Loan PL 10-58 PL 14-37 (originally PL 7-32)

PRINCIPAL AMOUNT The amount of loan/Grant/Scholarship provided to you	AMOUNT FORGIVEN Amount applied for cancellation as stated on the established rules and regulations when loans/grants/scholarships were granted.	TOTAL PAYMENT The amount you will have paid after you have made all payments as schedule
(CAR will complete this section after you've submitted this form.)		

No. of Payments	Amount of Payment	When payments are due	Beginning
(CAR will complete this section after you've submitted this form.) For those in default: A billing statement will be following this notice.			

Previous Recipient's Signature: _____ Date: _____

Reviewed By: _____ Date: _____