

Syracuse University

Project Advance

Haudenosaunee Promise Scholarship Application

Date _____ / _____ / _____ (mm/dd/yy)

Personal Information:

Name: _____
(First) (Middle) (Last)

High School: _____

Home Address: _____
(Street)

_____ (City) (State) (Zip/Postal Code) (Country)

Email: _____ @ _____ Gender: Male Female

Date of Birth: _____ / _____ / _____ (mm/dd/yy) Telephone: (_____) _____ - _____

Citizenship and Residency Information:

Please list your Haudenosaunee Territory:

Please indicate your current residence on one of the following Haudenosaunee nation territories:

- | | | |
|--|---|---|
| <input type="checkbox"/> Akwesane Mohawk | <input type="checkbox"/> Six Nations Reserve | <input type="checkbox"/> Allegany Seneca |
| <input type="checkbox"/> Kanatsiohareke Mohawk | (Canada) | <input type="checkbox"/> Cattaraugus Seneca |
| <input type="checkbox"/> Ganienke Mohawk | <input type="checkbox"/> Oneida of the Thames | <input type="checkbox"/> Niagara Falls Seneca |
| <input type="checkbox"/> Kahnawake Mohawk | (Ontario) | <input type="checkbox"/> Tonawanda Seneca |
| <input type="checkbox"/> Kanesatake Mohawk | <input type="checkbox"/> Oneida | <input type="checkbox"/> Tuscarora |
| | <input type="checkbox"/> Oil Spring Seneca | <input type="checkbox"/> Tyendinaga Mohawk |
| | <input type="checkbox"/> Onondaga | |

Note on Residency: Eligible candidates must have resided on an eligible territory three years prior to and during their enrollment in Syracuse University courses offered through Project Advance. A letter of certification from your nation must accompany this application

(Signature) _____ / _____ / _____
(Date)

To be eligible for the Haudenosaunee Promise program at SUPA, you must also **complete the registration process available at <https://pass.supa.syr.edu/registration/login.php>**