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| **STUDENT DATA** | | | | |  |
| **NOTE: This form must be completed by applicants under the Native American and Alaska Native Children in School Program (NAM).** | | | | |
| **Name of the applicant:** | | | | |
| **SECTION A** | | | | |
| **Name of the participant school (s).** | **Grade (s) to be served by the program.** | **Total number of students enrolled in the school.** | **Total number of Native American or Alaska native LEP students to be served by the program.** | **Total number of Native American or Alaska native students enrolled in the school.** |
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| **SECTION B** | | | | |
| **Name of the Authorized Representative:** | | | | |
| **Signature:** | | | | |
| **Date:** | | | | |

OMB Number 1885-0551 Expires / /

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