

Tuition Waiver Program Foster Care

2025-2026 Application

Deadline: First-come, First-served

PROGRAM ELIGIBILITY INFORMATION

The Tuition Waiver Program (Foster Care) is a state of Maine program for eligible students pursuing a post-secondary 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. *Note: FAME will verify your status with the Maine Department of Health and Human Services (DHHS) upon receipt of your application.*

- ➤ Be in Maine's foster care program
- Be adopted from Maine's foster care program and adoptive parent(s) receive a subsidy from Maine DHHS
- Be a minor ward of a permanency guardian and guardian(s) receive a subsidy from Maine DHHS

In addition to the above and to completing the Tuition Waiver Program (Foster Care) application, a student must:

- Be a Maine resident
- Have received acceptance into a degree program at one of the following:
 - A University of Maine campus
 - A Maine Community College
 - Maine Maritime Academy
- Submit all required supplemental forms and documents to FAME
- Submit the 2025-2026 Free Application for Federal Student Aid (FAFSA)

Award notifications are sent by May 1, 2025.

This program is governed by Maine law as set forth in 20-A M.R.S.A. §12571 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. However, funds are limited and are awarded on a first-come, first-served basis. Completed applications and required documents **must be submitted directly to FAME via postal mail**. We cannot accept faxed, e-mailed, 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 the envelope with the postmark.

Applicants must:

- Complete the Tuition Waiver Program (Foster Care) 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
- File the 2025-2026 FAFSA

You must submit all required documents for your application to be complete. FAME assumes no responsibility for identifying missing or erroneous information.

APPLICATION CHECKLIST

- □ Tuition Waiver Program (Foster Care) Application
 - Complete pages 2 and 5, and
 - Read FAME's privacy policy and ✓ the box at the bottom of page 4
- □ Proof of Acceptance or Enrollment in a Degree Program
- □ Submitted 2025-2026 FAFSA



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APPLICANT INFORMATION							
Social Security Number	Last Name	First Name		MI	Date of Birth		
Home Address (Permanent/Legal) Street		Apt /Unit	City/State/Zip	·			
Mailing Address (If Differen	Apt /Unit	City/State/Zip					
Day Phone Number Cell Phone Number		E-mail Address	E-mail Address				
List the date you filed the 2	025-2026 Free Application for Fe	ederal Student Aid (FAF	SA) – MM/DD/YY				
CURRENT ENROLLMENT PLANS	High School or College attending in 2025-2026			Expected Graduation Date (MM/YY)			
EXPECTED ENROLLMENT PLANS	College attending in 2025-2026			Expected College Graduation Date (MM/YY)			
JMG Participant U Yes U Yes				JMG Specialist	's Email Address		

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 long our customer, we continue to share your information as described in this notice. However, you can contact us at any time to limit or 	
	sharing.	
Questions?	info@famemaine.com	

Who we are			
Who is 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 with federal 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:		
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.			
Non-affiliates	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.			
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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APPLICANT INFORMATION							
•	cial Security Number st 4 digits ONLY on this page) X – XX –			First Name			Date of Birth
AUTHORIZA [*]	TIONS (Option	nal)					
verification tha	it they are such i	Authority of Maine (FA person and correct recit trary is received by FAI	ting of m				
Examples:	First Name	Last Name	Relation	onship to Applicant		Email or	Phone
Parent							
Guardian							
Spouse JMG Specialist							
JIVIO Specialist							
APPLICANT .	AUTHORIZAT	ION					
I hereby certify that all of the information set forth on this form is true, correct, and complete.							
Signature of Applicant Date							
APPLICANT	SIGNATURE /	AND CERTIFICATION	N				
I acknowledge that FAME will verify my eligibility (see page 1) for this program with the Maine Department of Health and Human Services (DHHS) upon receipt of my application. 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 have read and I understand FAME's Privacy Policy Notice. 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 my school(s) and/or DHHS and my JMG Specialist for purposes of processing my application. I understand participation in the JMG program neither improves nor hurts my chances of being selected for this program.							
Signature of Applicant Date							

Please note: The completed application must be mailed. It will not be accepted by fax, e-mail, or hand delivery. The application does not need to be overnighted to FAME. The envelope must have the postmark date clearly visible. Make certain the postmark date is the correct date and legible on the envelope. This can be done by having the postmaster hand stamp the envelope with the postmark.