RAP-2 – Additional Information

TLA'AMIN NATION Review and Appeal Law Form RAP-2 ADDITIONAL INFORMATION		Date received: _____ Request number: _____ (for office use only)

I, _____ *[Name of applicant]*, submit the following background information to my Review or Appeal Request dated _____.

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[This RAP-2 form may be a maximum of four pages long.]

Full name of applicant or agent: _____

Signature: _____ Date: _____

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