This form is intended to field requests for Wôpanâak translation and/or Wôpanâak word analysis. Each request is reviewed by members of the Wôpanâak Language Reclamation Project committee. This committee is comprised of individuals from four communities within the Wampanoag Nation. All requests are taken under consideration regardless of the petitioner and all decisions rest with the committee as a whole. Please include as complete a description of your request as possible. The Language Committee will provide a response to your organization within one week of a vote. Please be aware that the Language Committee meets approximately every month.

Please note that any requests for translation that are approved by the Language Committee may be used strictly for the purpose indicated in this document only. Further, requests for translation are for the single use of the language noted in this application only and not for a broader usage. Please note that we will not consider the following types of requests:

- Names for your non-native child
- Names for your non-tribally owned property/home (especially if there is evidence of ancestral remains)
- Names for your pet
- Translations for words you are using in your Wampanoag-based historical fiction novel/song/poem/other, content for which hasn't first been vetted through the Wampanoag community.
- Words for tattoos for non-tribally affiliated individuals

Signed Agreement:

I understand that the Wôpanâak Language is protected by copyright, is not for sale and may not be used on any items whatsoever that are intended for sale, trade, or licensing, nor may it be replicated on items that will be sold, traded or licensed. I further understand that any violation of this agreement will be prosecuted to the full extent of the law.

________________________________________________________________________

Signature

Please fill out the attached form and mail completed form to:

Wôpanâak Language Reclamation Project
PO Box 2241
Mashpee, MA 02649

OR

E-mail it to: info@wlrp.org
Request for Linguistic Analysis/Translation

Date:______________________________________________

Requesting Agency or Individual:______________________________________________

Your Tribal Affiliation:______________________________________________

Contact:______________________________________________

Title:______________________________________________

Address:______________________________________________

Tel.:______________________________________________

Business license # (EIN):______________________________________________

Are you requesting assistance on behalf of a nonprofit organization?________

501(c)3 cert. #:______________________________________________

Is your organization a charitable organization?______________________________________________

How will this translation be used?______________________________________________

Detailed Description of Your Request: