

Application for **ADMISSION**

- Complete and return this application for admission to the Registrar's Office located in Student Services.
- Please attach high school diploma or GED certificate AND college transcripts for every college previously attended.
- Complete Tribal Enrollment Verification Request. Tribal enrollment card may be used to verify tribal enrollment.
- A one-time application fee of \$15.00 must accompany each new application for admission.

Your admission file is complete when all of the items listed above have been sent to the Registrar's Office.

A. Personal Data

Last Name		First Name		M.I.	Maiden Name	
Current Mailing Address		City		State	Zip Code	
Permanent Address (if different from mailing address)		City		State	Zip Code	
Home Number	Cell or Other Number		Email Address			
Date of Birth	Social Security Number		Gender		Marital Status	
	— —		<input type="checkbox"/> Male <input type="checkbox"/> Female		<input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Married <input type="checkbox"/> Separated	

B. Enrollment Data

Term & Year Attending	<input type="checkbox"/> Fall:		<input type="checkbox"/> Spring:		<input type="checkbox"/> Summer:	
Entering LLTC as:	<input type="checkbox"/> New: Never attended college	<input type="checkbox"/> Readmitted Attended LLTC before	<input type="checkbox"/> Transfer: Attended another college	<input type="checkbox"/> Elder 55+ Years	<input type="checkbox"/> Other, Specify:	
Expected Enrollment	<input type="checkbox"/> Full-Time; 12+ Credits	<input type="checkbox"/> 3/4 -Time; 9-11 Credits	<input type="checkbox"/> 1/2 -Time; 6-8 Credits	<input type="checkbox"/> <1/2 -Time; 1-5 Credits		
Do you intend to seek a degree at LLTC?	<input type="checkbox"/> Yes <input type="checkbox"/> No		Anticipated Completion Date:			
Choice of Degree, Major, Diploma, Certificate:						
<input type="checkbox"/> Undecided <input type="checkbox"/> Associate of Applied Science Degree <input type="checkbox"/> Business Management <input type="checkbox"/> Law Enforcement		<input type="checkbox"/> Associate of Arts Degree <input type="checkbox"/> Early Childhood Education <input type="checkbox"/> Indigenous Leadership <input type="checkbox"/> Liberal Education <input type="checkbox"/> Liberal Education, STEM Emphasis			<input type="checkbox"/> Diploma <input type="checkbox"/> Construction Electricity <input type="checkbox"/> Residential Carpentry <input type="checkbox"/> Certificate <input type="checkbox"/> Child Development Associate	

C. Educational Data

Official transcripts (unofficial if mailed directly) from previous colleges attended must accompany application--failure to comply will prevent you from further registration. You are responsible for requesting and payment for those transcripts.

High School Name, City, State	Graduation Date:	Office Use Only HS/GED Date: Initials:	
GED Test Site Name, City, State	Completion Date:		
College/University Name, City, State	Degree/Certificate Earned: <input type="checkbox"/> None	Graduation Date:	
College/University Name, City, State	Degree/Certificate Earned: <input type="checkbox"/> None	Graduation Date:	

D. Request for Confidential Information

Have you served in the Armed Forces? <input type="checkbox"/> Yes <input type="checkbox"/> No	Branch: _____	Dates of Services: _____
Are you a U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you Hispanic or Latino? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Predominant Ethnic Background: Please check (✓) all that apply:		
<input type="checkbox"/> American Indian or Alaska Native; Tribal Affiliation: <input type="checkbox"/> MN Chippewa Tribe (List Band): _____ <input type="checkbox"/> Other Tribe: _____ <input type="checkbox"/> Not Tribally Enrolled		
<input type="checkbox"/> Native Hawaiian/Other Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Asian <input type="checkbox"/> Black/African American <input type="checkbox"/> Other _____		

E. Parent(s)/ Guardian(s) Highest Level of Education

Parent or Guardian #1					
<input type="checkbox"/> No high school diploma	<input type="checkbox"/> High School Diploma	<input type="checkbox"/> GED	<input type="checkbox"/> Some College	<input type="checkbox"/> Bachelor's degree or higher	<input type="checkbox"/> Unsure
Parent or Guardian #2					
<input type="checkbox"/> No high school diploma	<input type="checkbox"/> High School Diploma	<input type="checkbox"/> GED	<input type="checkbox"/> Some College	<input type="checkbox"/> Bachelor's degree or higher	<input type="checkbox"/> Unsure

F. Policy

Federal law prohibits us from making preadmission inquiry about disabilities. Information regarding disabilities voluntarily given or inadvertently received, will not adversely affect any admission decisions. If you require special services because of a disability, you may notify the Dean of Student Services. This voluntary self-identification allows Leech Lake Tribal College to prepare appropriate support services to facilitate your learning. This information will be kept in strict confidence and has no effect on your admission to the College.

G. Emergency Contact Name & Relationship

Name	Address	Phone #

H. Signature Required by All Applicants

I certify that the information provided on this application is complete, accurate, and true to the best of my knowledge. I understand that it is my responsibility to request that official transcripts for each academic institution I have attended be submitted directly to LLTC. I understand that misrepresentation of application information is sufficient grounds for suspension.

Signature _____ Date ____/____/____

I. Permission for Release of Information

Leech Lake Tribal College complies with federal and state privacy laws and regulations. By signing below, you are giving LLTC permission to release information pertaining to your academic, scholastic, awards, achievements, special recognitions, extra curricular activities, institution employment and any other pertinent information for the express purpose of enhancing and promoting your academic, current and future employment and other personal goals.

Signature _____ Date ____/____/____

This information will not be used for any other use, unless expressly consented to in a release signed by you. Unless provided for in all signatures forms applicable for admissions, registration, financial aid, and of other mandatory forms. All other information/data will be kept strictly confidential as provided for by the Right to Privacy and Data Act.

Additional Information:

- Complete the Financial Aid Applications: FAFSA, MN ISAP, Tribal Scholarship Application
- Meet with an Academic Advisor: COMPASS Assessment Test, Discussion Academic Plans, TRiO Program Application

Thank You for choosing Leech Lake Tribal College. We Look forward to serving you!