

UNDERGRADUATE-GRADUATE ADMISSION APPLICATION

CAMPUS SITE: Sinte Gleska University

Entrance Level: _____ Undergraduate _____ Graduate
Semester Entering: Spring 20_____ Fall 20_____ Summer 20_____
Student Classification: Beginning/First Time Senior
 Freshman Graduate Student
 Sophomore Transfer
 Junior Workshop

PERSONAL DATA:

Name: _____ **SSN#:** _____ - _____ - _____
(Last) (First) (Middle)

Address: _____
(PO Box) (City) (State) (Zip)

Home Phone: _____ **Work Phone:** _____

Email Address: _____

Date of Birth: _____ **Male** **Female** **Marital Status:** Single Married

Ethnic Origin: Indian Non-Indian **U.S. Citizen?** Yes No

Are you an enrolled member of a federally recognized tribe? Yes No

Tribe/Agency Location: _____

Do you require services for a disability? Yes No

Emergency contact Name: _____ **Phone:** _____

Relationship: _____

Are you a first generation student? (Do your parents have a four year college degree?) Yes No

Are you a single parent? Yes No **Are you eligible for Veteran's Benefits?** Yes No

Educational Data:

Do you have a high school diploma? Yes No **Graduation Date:** _____

Do you have a GED? Yes No **Date of completion:** _____

List all colleges/universities attended:

Name	Location	Dates of attendance	Degree earned
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Are any of these credits being transferred to Sinte Gleska University? Yes No
If yes, please request an official transcript from each institution.

Major: (All students must declare a major, please indicate one only)

- Art Institute
- Arts & Science
- Business Education
- Education
- Human Services
- Lakota Studies
- Education
- Graduate Education Program
- Human Services Graduate Program
- Re-certification/Workshop
- Institute of Technologies

Signed: _____ **Date:** _____

Please complete the following:

Is English your primary language? Yes No

Are you a bilingual speaker? Yes No **What languages?** _____

Family Data:

Mother's Full Name: _____

Is your mother enrolled in a Federally recognized tribe? Yes No **Which Tribe?** _____

Father's Full Name: _____

Is your father enrolled in a Federally recognized tribe? Yes No **Which Tribe?** _____

Resident Status:

Do you reside on a reservation? Yes No

Are you a resident of South Dakota? Yes No **If not, which state?** _____

Employment Status:

Full-time Part-time Unemployed Seeking Employment Self Employed

Do you consider yourself to be low income? Yes No

To the best of my knowledge, the information provided on this application is true and correct.



**SINTE GLESKA UNIVERSITY
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