

UNDERGRADUATE-GRADUATE ADMISSION APPLICATION

CAMPUS SITE: Sinte Gleska University

Entrance Level: Undergraduate Graduate Personal Interest-Not seeking a degree

Semester Entering: Spring 20 Fall 20 Summer 20

Student Classification: Beginning/First Time Senior
 Freshman Graduate Student
 Sophomore Transfer
 Junior

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? (Parents do not 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: _____ High School: _____

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

List all colleges/universities attended:

<u>Name</u>	<u>Location</u>	<u>Dates of attendance</u>	<u>Degree earned</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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 degree-seeking students must declare a major. Please indicate one only.)

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

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.

Signed: _____ Date: _____



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