



WHITE EARTH TRIBAL & COMMUNITY COLLEGE
GAAWAABAABIGANIKAAG GABEGIKENDAASOWIGAMIG

APPLICATIONS FOR ADMISSIONS

Last Name		First Name	Middle Initial	Maiden Name	
Enrolled Federally Recognized Tribe			Tribal ID #	Descendent	
Address				Date of Birth	SSN
City, State, Zip				County	
Phone	Alternative Phone		Email		
Emergency Contact			Emergency Phone	Emergency Alternative Phone	

EDUCATION

High School (name & address)	Graduation Date	State Rec'd GED	Certificate Date
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TRANSFER STUDENTS

(use additional paper/space at end if necessary)

NO OTHER COLLEGES ATTENDED

All transfers students must request ALL collegiate institutions to mail OFFICIAL transcripts directly to WETCC.

College Name	College Address	City, State, Zip	Dates Attended

ADMISSIONS DATA

Expected Enrollment	Expected Entrance	Educational Intent	Degree Program/Emphasis Area*
<input type="checkbox"/> Full-time <input type="checkbox"/> ¾ time <input type="checkbox"/> ½ time <input type="checkbox"/> Less than ½ time	<input type="checkbox"/> 20 _____ <input type="checkbox"/> Fall (Sept-Dec) <input type="checkbox"/> Spring (Jan-May) <input type="checkbox"/> Summer	<input type="checkbox"/> Earn Associates Degree & transfer <input type="checkbox"/> Complete courses, transfer without degree <input type="checkbox"/> Earn Associates Degree <input type="checkbox"/> Non-Degree <input type="checkbox"/> Audit <input type="checkbox"/> Senior Citizen Waiver <input type="checkbox"/> Culture Waiver <input type="checkbox"/> Faculty/Staff Waiver <input type="checkbox"/> Summer Waiver	A.A. <input type="checkbox"/> Early Childhood <input type="checkbox"/> Business Administration <input type="checkbox"/> Education <input type="checkbox"/> Environmental Science <input type="checkbox"/> Humanities, Arts & Social Sciences <input type="checkbox"/> Native American Studies <input type="checkbox"/> Human Services *Needed for financial aid and can be changed at any time.

By typing or signing my name, I hereby certify that to the best of my knowledge the foregoing information is true and complete without evasion or misrepresentation. I understand that if it is found otherwise, it is sufficient for rejection or dismissal. I agree to abide by the present and future rules and regulations, both academic and nonacademic, and the scholastic standards of WETCC including but not limited to those rules, regulations and standards stated in the catalog. I further acknowledge that if I fail to adhere to these regulations or meet these requirements, my registration may be canceled.

Applicant Signature _____

Date _____

**PO Box 478
Mahnomen MN 56557**

www.wetcc.edu

Phone 218-935-0417

Fax 218-936-5736