



WHITE EARTH TRIBAL & COMMUNITY COLLEGE  
GAAWAABAABIGANIKAAG GABEGIKENDAASOWIGAMIG

**APPLICATION FOR ADMISSIONS CHECKLIST**

**Admission is not complete until each of these items has been received by the WETCC Admissions Office and the applicant has received a letter of acceptance.**

The following items are required of each applicant and forms are included in this packet, unless noted:

- \_\_\_\_\_ 1. A completed White Earth Tribal & Community College application for admission.
- \_\_\_\_\_ 2. Official high school transcript or a high school equivalency certificate (GED) issued by a state department of public instruction.
- \_\_\_\_\_ 3. If a transfer student, OFFICIAL transcripts from other college must be submitted. A small fee may be charged by other college and is the student's responsibility.
- \_\_\_\_\_ 4. Placement testing (by appointment) at WETCC.  
EXCEPTIONS:
  - i. 1) Testing has taken place elsewhere and scores can be provided to WETCC or
  - ii. 2) Transfer students having a "C" grade or better in a 100 level or higher Math and/or English course.
- \_\_\_\_\_ 5. Tribal enrollment certification if an enrolled member of a recognized tribe (Ethnicity Form).
- \_\_\_\_\_ 6. Minnesota Department of Health Immunization Form OR Evidence of Immunization (Proof of two Measles Mumps and Rubella (MMR) Immunizations).

**If you have questions, please contact the WETCC Admissions office at 218-935-0417**

Application must be fully complete upon submission; missing information will delay the admissions process. Allow two to three weeks to process all applications and refer to the academic calendar at <http://www.wetcc.edu> for registration deadline and other information.

It is the student's responsibility to meet with an advisor and sign the necessary forms required for registration. Students should make an appointment with the Financial Aid Office to complete the Financial Aid application. This procedure is vital to the enrollment process and is needed to ensure financial support for payment to WETCC for tuition and fees. The required FAFSA Application may be completed on-line at <http://www.fafsa.ed.gov>. The school code for WETCC is **039214**.

The College is asking you to provide information that includes private and or confidential information under state and federal law. You are not legally required to provide the information the college is requesting; however, the college may not be able to effectively process your application if you do not provide sufficient information. With some exceptions, unless you consent otherwise, this information will be limited to school officials, including faculty who have legitimate educational interests in the information. Under certain circumstances federal and state laws authorize release of private information without your consent:

- To other schools in which you seek or intend to enroll, or are enrolled, if you are first notified of the release;
- To federal, state or local officials for purposes of program compliance, audit or evaluation;
- As appropriate in connection with your application for, or receipt of financial aid;
- If the information is sought by a subpoena, court order, or otherwise permitted by other state or federal law; and
- To organizations engaged in educational research or an accrediting agency.

White Earth Tribal & Community College abides by the provision of the Title IX and other state and federal laws forbidding discrimination on the basis of sex, race, color, national origin or handicap and all other state and federal laws regarding equal opportunity.

**PO Box 478  
Mahnomen MN 56557**

**[www.wetcc.edu](http://www.wetcc.edu)**

**Phone 218-935-0417  
Fax 218-936-5814**



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**APPLICATION FOR ADMISSION**

**Personal Information** (Please print clearly.)

Last Name	First Name	Middle Initial	Suffix (I, II, JR., SR, etc.)	Maiden or Other Name(s)
Address	City	State	Zip	County
If you are a MN resident, how long have you lived in MN (years/months)?	Are you a resident of a state other than MN? If so, please specify. <input type="checkbox"/> No <input type="checkbox"/> Yes: _____			
Phone 1 <input type="checkbox"/> Cell <input type="checkbox"/> Home <input type="checkbox"/> Work	Phone 2 <input type="checkbox"/> Cell <input type="checkbox"/> Home <input type="checkbox"/> Work	Primary Email <input type="checkbox"/> Personal <input type="checkbox"/> Work		
Date of Birth	Social Security Number	Secondary Email <input type="checkbox"/> Personal <input type="checkbox"/> Work		
Emergency Contact	Emergency Phone 1	Emergency Phone 2		

**Education**

High School (name & address)	Graduation Date	GED (issuing state)	GED Certificate Date
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- I am entering WETCC as a PSEO (Post-Secondary Enrollment Options) student.
- I have not attended any other college.
- I have previously attended the college(s) listed below. (Attach additional sheet if necessary.)

College Name	College Address	City, State, Zip	Dates Attended

All transfers students must request an OFFICIAL transcript from each college previously attended and have it mailed directly to WETCC.

**Admissions Data**

Expected Enrollment	Expected Entrance	Educational Intent
<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	<input type="checkbox"/> 20____ <input type="checkbox"/> Fall (Aug-Dec) <input type="checkbox"/> Spring (Jan-May)	<input type="checkbox"/> Earn Associate Degree (AA) <input type="checkbox"/> Earn Associate Degree (AA) & transfer to 4-year institution <input type="checkbox"/> Complete some courses and transfer without a degree <input type="checkbox"/> Complete some courses <input type="checkbox"/> Course Audit

2250 College Road  
Mahnomen MN 56557

www.WETCC.edu

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Fax 218-936-5814

## Demographic Information

The following information helps WETCC evaluate student recruitment and retention efforts and is used for statistical reporting. This information is voluntary.

Gender <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Other: _____		Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> Other	
Citizenship Status <input type="checkbox"/> US Citizen <input type="checkbox"/> Resident Alien <input type="checkbox"/> Refugee/Asylee <input type="checkbox"/> Temporary Protected Status <input type="checkbox"/> Other: _____			
<u>Race (select any that apply)</u>			
<input type="checkbox"/> Native American or Alaska Native			
<input type="checkbox"/> White Earth Band of the Minnesota Chippewa Tribe (tribal ID Number) _____			
<input type="checkbox"/> Other Federally Recognized Tribe (specify) _____			
<input type="checkbox"/> 1 <sup>st</sup> Generation Descendent (specify band) _____			
<input type="checkbox"/> 2 <sup>nd</sup> Generation Descendent (specify band) _____			
<input type="checkbox"/> Not Tribally Enrolled			
<input type="checkbox"/> Asian			
<input type="checkbox"/> Black/African American			
<input type="checkbox"/> Native Hawaiian or other Pacific Islander			
<input type="checkbox"/> White/Caucasian			
<u>Ethnicity</u>			
<input type="checkbox"/> Hispanic or Latino			
(of Cuban, Mexican, Chicano, Puerto Rican, South or Central American, or other Spanish culture, regardless of race)			
<input type="checkbox"/> Not Hispanic or Latino			
Are you a Native American language speaker?			
<input type="checkbox"/> No <input type="checkbox"/> Yes Language: _____ Fluency: <input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced <input type="checkbox"/> Native Speaker			
First Generation Student – Indicate your parents' level of education.			
Mother: <input type="checkbox"/> No Diploma/GED <input type="checkbox"/> Diploma/GED <input type="checkbox"/> Some college w/o degree <input type="checkbox"/> 2-year degree <input type="checkbox"/> 4-year degree <input type="checkbox"/> Advanced Degree			
Father: <input type="checkbox"/> No Diploma/GED <input type="checkbox"/> Diploma/GED <input type="checkbox"/> Some college w/o degree <input type="checkbox"/> 2-year degree <input type="checkbox"/> 4-year degree <input type="checkbox"/> Advanced Degree			
Will you be employed while attending college?			
<input type="checkbox"/> No <input type="checkbox"/> Less than 20 hours/week <input type="checkbox"/> 20 or more hours/week			
Are you the Primary Care Provider for elderly family members in your home?		Do you have dependent children?	
<input type="checkbox"/> No <input type="checkbox"/> Yes		<input type="checkbox"/> No <input type="checkbox"/> Yes How Many? _____	
Is your primary address within 60 miles of an Indian Reservation?		Do you live on the White Earth Indian Reservation?	
<input type="checkbox"/> No <input type="checkbox"/> Yes		<input type="checkbox"/> No <input type="checkbox"/> Yes	
Are you a veteran?			
<input type="checkbox"/> No <input type="checkbox"/> Yes Branch: <input type="checkbox"/> Army <input type="checkbox"/> Navy <input type="checkbox"/> Air Force <input type="checkbox"/> Marines <input type="checkbox"/> Coast Guard <input type="checkbox"/> National Guard			
How were you referred to WETCC? (select all that apply)			
<input type="checkbox"/> Relative/Friend <input type="checkbox"/> Newspaper <input type="checkbox"/> Billboard <input type="checkbox"/> Radio/TV <input type="checkbox"/> Internet <input type="checkbox"/> Social Media <input type="checkbox"/> College/Career Fair			
<input type="checkbox"/> High School Visit <input type="checkbox"/> Flyer/Brochure <input type="checkbox"/> Powwow <input type="checkbox"/> WETCC Event <input type="checkbox"/> Other: _____			

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 \_\_\_\_\_



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**INDIAN BLOOD VERIFICATION FORM**

COMPLETE TOP OF FORM AND SIGN AND RETURN TO WHITE EARTH TRIBAL & COMMUNITY COLLEGE, PO BOX 478, MAHNOMEN, MN 56557.

LAST NAME	FIRST NAME	MIDDLE INITIAL	MAIDEN	
PERMANENT STREET ADDRESS		CITY	STATE	ZIP
AREA CODE/TELEPHONE	DATE OF BIRTH	STATE OF RESIDENCY		
FATHER'S NAME	DATE OF BIRTH	TRIBAL AFFILIATION		
MOTHER'S MAIDEN NAME	DATE OF BIRTH	TRIBAL AFFILIATION		
NAME ENROLLED UNDER IF DIFFERENT FROM ABOVE				
FIRST GENERATION DESCENDANT: ARE EITHER OF YOUR PARENTS ENROLLED MEMBERS OF A TRIBE?				

I hereby give White Earth Tribal & Community College permission to verify my Indian Blood Quantum.

\_\_\_\_\_  
APPLICANT SIGNATURE

\_\_\_\_\_  
DATE

I HEREBY CERTIFY THAT THE ABOVE NAMED APPLICANT:

\_\_\_\_\_ IS AN ENROLLED MEMBER OF THE MINNESOTA CHIPPEWA TRIBE, WHITE EARTH BAND

\_\_\_\_\_ IS A DESCENDENT OF THE MINNESOTA CHIPPEWA TRIBE, WHITE EARTH BAND

\_\_\_\_\_ IS A MEMBER OF A FEDERALLY RECOGNIZED TRIBE

\_\_\_\_\_ IS A NON-INDIAN

I HEREBY CERTIFY THAT THE ABOVE NAMED APPLICANT IS \_\_\_\_\_/\_\_\_\_\_ DEGREE OF MCT INDIAN BLOOD,  
WHITE EARTH, ACCORDING TO AVAILABLE RECORDS.

\_\_\_\_\_  
CERTIFYING OFFICIAL SIGNATURE

Please return to:  
White Earth Tribal & Community College  
PO Box 478  
Mahnomen, MN 56557

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**TRANSCRIPT OR GED CERTIFICATE REQUEST**

STUDENT: Please send a completed form directly to each high school and college previously attended.

**Type of School:** (check one)

High School

College

GED Certificate

INSTITUTION

P.O BOX OR STREET ADDRESS

CITY, STATE, ZIP

**I HEREBY REQUEST THAT THE FOLLOWING RECORDS/TRANSCRIPTS BE SENT TO:**

White Earth Tribal & Community College  
 Admissions Office  
 PO Box 478  
 Mahnomen, MN 56557  
 PHONE: 218-935-0417 ext 322 FAX: 218-936-5814

Official Transcripts

GED Test Scores/Certificate

Immunization Record

Other \_\_\_\_\_

Date of Attendance/Year Graduated \_\_\_\_\_

LAST NAME	FIRST NAME	MIDDLE INITIAL	MAIDEN NAME	
ADDRESS			DATE OF BIRTH	SOCIAL SECURITY NUMBER
CITY, STATE, ZIP			PHONE	ALTERNATIVE PHONE
EMAIL				

I hereby authorize White Earth Tribal & Community College to obtain a copy of my high school and/or college transcripts or GED certificate. A copy of this information will be placed in my permanent file. My signature below authorizes this understanding and releases this information to White Earth Tribal & Community College.

STUDENT SIGNATURE

DATE

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