Application for Admission
Chief Dull Knife College

Thank you for taking an interest in Chief Dull Knife College. We are delighted that you are completing this application. To complete the process we need two items:

1) A complete application form
2) A copy of your high school transcript or GED certificate (plus college transcripts if applicable). Direct all items to the Admissions Office.

Application For: __ Fall __ Spring 20____
Class Status: __ Incoming freshman __ Incoming transfer __ Full Time __ Part Time

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name (no nickname)</th>
<th>Middle Name</th>
<th>Maiden Name</th>
</tr>
</thead>
</table>

Mailing Address | City | State | Zip | Home Phone Number |

Sex [ ] Male [ ] Female Age Birth Date Social Security Ethnic Background (optional)

Tribal Affiliation Are you a U.S. Citizen? [ ] Yes [ ] No If no, Country: [ ] Yes If Yes, dates of service [ ] No

Name of High Schools and Colleges Attended Location Dates Attended Degrees Earned

<table>
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Academic interests or intended major
(1) (2)

Career or Vocational goal:
(1) (2)

Will you be applying for financial aid?
[ ] Yes [ ] No If No, how will you be financing your education

I certify that I have answered all questions accurately and to the best of my knowledge and if admitted to Chief Dull Knife College, I agree to abide by all rules and regulations.

Signature of applicant __________________________ Date __________________________

Chief Dull Knife College admits students of any race, color, age, sex, national and ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, age, sex, national and ethnic origin in administration of its educational policies, scholarship and loan programs and athletic and other school-administrated programs.
NAME: _____________________________________________________

ADDRESS: _____________________________________________________

CITY, STATE, ZIP: _____________________________________________________

The following information is needed for our student records. It will be held confidential.

I give permission to Chief Dull Knife College Registrar’s Office to request a copy of my Certificate of Indian Blood.

TRIBE: _____________________________________________________

AGENCY ADDRESS: _____________________________________________________

DATE OF BIRTH: _____________________________________________________

Your assistance is greatly appreciated.

Note: If you are not of Indian descent disregard this form.
Record Request

Type of School Attended:      _____________________________________________

(check one)

High School:  ________  _____________________________________________

College:          ________  P.O. Box or Street Number

_____________________________________________

City, State, Zip

I HERBY REQUEST THAT THE FOLLOWING RECORDS/TRANSCRIPTS BE TO:

Office of The Registrar
Chief Dull Knife College
P.O. Box 98
Lame Deer, MT  59043

______ Official Transcripts                                       Date of Attendance/Year Graduated:______

______ Test Scores

______ Immunization Record/Other

____________________________________            ____________________________________

Print Your Name(If Married, Maiden Name)             Signature

____________________________________ ____________________________________

Address Date of Birth

____________________________________ ____________________________________

City, State, Zip Social Security Number
GED REQUEST FORM

STUDENT: Please print your legal name in the space provided below and sign. Make sure that you also fill in your birth date. Mail to:
OFFICE OF SUPERINTENDENT OF PUBLIC INSTRUCTION
STATE CAPITOL
S.S.#__________________________  HELENA, MT 59601

OPI: Please send a copy of my GED test scores to the address listed below:
OFFICE OF ADMISSIONS
CHIEF DULL KNIFE COLLEGE
P.O. BOX 98
LAME DEER, MT 59043

DATE OF BIRTH

LAST NAME                  FIRST                  MIDDLE                  MAIDEN

ADDRESS                  CITY                  STATE                  ZIP CODE

SIGNATURE

Date and address where GED s taken

DATE
CDKC Application Check List

The following items are required of each applicant:

___ 1. A completed Chief Dull Knife College application for admission;

___ 2. Official high school transcript of a high school equivalency certificate issued by a state department of public instruction;

___ 3. Scores from the CDKC placement test;

___ 4. Tribal enrollment certification if an enrolled member of a recognized tribe;

___ 5. Evidence of Immunization (Proof of two Measles Mumps and Rubella (MMR) Immunizations

Admission is not complete until each of these items has been received by the office of the Registrar and the application has received a letter of acceptance.