Admission Application

Haskell Indian Nations University

Application for Admissions

Phone: (785) 749-8454; Web Site: www.haskell.edu

What semester are you planning to attend Haskell? O Fall 20_ O Spring 20_ O Summer 20_ Legal Name: (as appears on legal documents, i.e. birth certificates, court documents) Last Name	DEADLINES: Fall – June 1	Spring - Nove	ember 15	Summer -	– April 15		
Last Name First Name Social Security Number Please select which degree O Associate of Arts (A.A.) Degree O Bachelor of Arts (B.A.) Degree Please write your major on the line. Permanent Mailing Address: Street or P.O. Box City State Zip Code Please select the your housing status: O Full-Time Student (Enrolled in 12 or more credits) (Must be carolled in 12 credits) Street or P.O. Box City State Zip Code Please select the your housing status: O On-Campus (Must be carolled in 12 credits) (Must be carolled in 12 credits) Street or P.O. Box City State Zip Code To case of an emergency, please provide the following information: O Parent O Spouse O Other:	What semester are you planning to attend Haske	ell? O Fall 20	0 0	Spring 20_	_ O Su:	mmer 20	
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If yes, explain:	Are you currently on or pending criminal probat	tion or parole?	o No	o Yes			
	If yes, explain:						

OMB Control No: 1076-0114 Expiration Date: 03/31/2025

CONFIDENTIAL

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Tribal Roll Number:							
State	Date From Date To						
O No Anticipated Date of O	Graduation						
Have you taken the ONO OYes GED: ONO OYes Date of GED Exam 155 Indian Ave #5031 Lawrence KS 66046-4800 www.haskell.edu							
No O Yes							
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Paperwork Reduction Act and Public Burden Statement:

Authority: Paperwork Reduction Act of 1995, Public Law 96-511, as amended.

This information is collected from Native American and Alaska Native individuals seeking enrollment to Southwestern Indian Polytechnic Institute. The information is used to identify students, determine eligibility, and identify any health and counseling services needed, and safety issues related to dormitory situations and record keeping purposes. The completed admissions forms are electronically entered into Haskell Indian Nations University Admissions and Records system to identify and maintain current information on students. It is estimated that this form will take an average of 15 minutes to complete. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB Control Number. Comments concerning clarity, utility of information or burden reduction may be sent to Haskell Indian Nations University, 155 Indian Ave, Box #5031, Lawrence, KS. Please note: comments, names, and addresses of commentators are available for public review during regular business hours. If you wish us to withhold this information you must state this prominently at the beginning of your comment. We will honor your request to the extent allowable by law.

Privacy Act Statement:

Authority: Privacy Act of 1974, Public Law 93-579, as amended.

This information collection document contains information that is covered under the Privacy Act Public Law and is for students completing Federal records and forms that solicit personal information. The Bureau of Indian Education will not disclose any record containing such information without the written consent of the respondent. The primary purpose and routine uses of this information is to determine eligibility for postsecondary educational services of the Haskell Indian Nations University, for identification purposes, to render appropriate services for students and for record keeping purposes. Examples of others who may request the information in summary are Members of Congress, or the Office of Management and Budget for the purpose of the budget. Collection of your Social Security Number is for identification purposes and is voluntary. Your voluntary responses are treated in a highly confidential manner.

EFFECTS OF NONDISCLOSURE: Providing this information is voluntary. If you choose not to provide information it may affect your eligibility for educational services.

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