

1. Have you ever attended another college or university? ( ) Y ( ) N - If yes, please submit official transcripts to the registrar's office.
2. Are you responsible for caring for an elderly family member? ( ) Y ( ) N
3. Do you speak an American Indian language? ( ) Limited ( ) Conversational ( ) Fluent
4. Did your father earn a bachelor's degree? ( ) Y ( ) N
5. Did your mother earn a bachelor's degree? ( ) Y ( ) N
6. Did you attend a Head Start program as a child? ( ) Y ( ) N
7. I am: ( ) Single with no children ( ) Single with dependent children  
( ) Married with no children ( ) Married with dependent children

**OFFICE OF THE REGISTRAR  
CHIEF DULL KNIFE COLLEGE  
REQUEST FOR NON-DISCLOSURE OF DIRECTORY INFORMATION**

The items listed below are designated as directory information and may be released for any purpose at the discretion of the university registrar. Under the provisions of the Family Educational Rights and Privacy Act (FERPA) of 1974, as amended, you have the right to withhold the disclosure of this directory information to non-university personnel:

- |  |   |
|--|---|
| <ul style="list-style-type: none"> <li>• NAME</li> <li>• TELEPHONE NUMBER</li> <li>• CLASS</li> <li>• FULL-TIME/PART-TIME STATUS</li> <li>• ENROLLMENT VERIFICATION</li> </ul> | <ul style="list-style-type: none"> <li>• ADDRESS</li> <li>• DATES OF ATTENDANCE</li> <li>• MAJOR</li> <li>• HONORS STATUS</li> <li>• DEGREE VERIFICATION</li> </ul> |
|--|---|

PLEASE NOTE: Under the provisions of FERPA, Chief Dull Knife College is required to release information in certain circumstances as required by law.

Once this completed form has been received, all directory information will be withheld until such time that you notify the Office of the Registrar via signed, written request that you wish to have the "confidential" status removed. This means that if you have a hold on your directory information all business must be conducted in person with photo identification or via written, signed authorization.

Please carefully consider the effects of your decision to request "confidential" status. After doing so, please initial by each statement indicating that you understand and agree to the following:

\_\_\_\_\_ Any questions I have about my status, account, or academic changes must be made in person with a photo ID. The university will not be able to do any business with me regarding my account over the phone or email. This includes but is not limited to: password resets, financial transactions, dropping and adding classes, requesting enrollment verifications for insurance purposes.

\_\_\_\_\_ My name and information will NOT be included in any publications regarding honors, awards, or graduation.

\_\_\_\_\_ Friends or relatives trying to reach me in case of an emergency will not be able to do so.

\_\_\_\_\_ Information that I am a student here will be suppressed so that information requests from prospective employers regarding my degree or attendance will be denied.

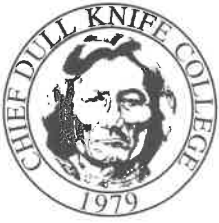
\_\_\_\_\_ Regardless of the effects upon me, the university assumes no liability for honoring my request for non-disclosure of my directory information.

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Student Name: \_\_\_\_\_ ID Number: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Employee Reviewing Document With Student: \_\_\_\_\_



# 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 for admission. To complete the process of evaluation we need the following items:

- A complete application form.
- A copy of your high school transcript or GED certificate (plus college transcripts if applicable).
- Evidence of immunization.
- Tribal enrollment certificate if applicable.

Direct all items to the Admission Office:  
 Chief Dull Knife College  
 P.O. Box 98  
 Lame Deer, Montana 59043

Application For:     Fall                                     Spring                                     Summer                                    20\_\_\_\_\_

Class Status:         Incoming freshman     Incoming transfer     Full Time                                     Part Time

Last name		First name (no nickname)		Middle name		Maiden name	
Mailing Address			City	State	Zip	Home Phone	
Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Age	Birth Date		Social Security Number		Ethnic Background (optional)	
Tribal Affiliation		Are you a U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No      If no, Country:			Are you a veteran? <input type="checkbox"/> Yes    If Yes, dates of service: <input type="checkbox"/> No		

Name of High schools and Colleges Attended	Location	Dates Attended	Degrees Earned
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Academic interests or intended major (1) _____ (2) _____  Career or vocational goal: (1) _____ (2) _____	Will you be applying for financial aid? <input type="checkbox"/> Yes  <input type="checkbox"/> No    If NO, how will you be financing your education at CDKC?
Will you be a degree-seeking student at C.D.K.C.? Yes / No    If yes, check one of the following: <input type="checkbox"/> A.A. <input type="checkbox"/> A.S. <input type="checkbox"/> A.A.S. or <input type="checkbox"/> Certificate	

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.

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Date \_\_\_\_\_ Signature of Applicant \_\_\_\_\_

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, admission policies, scholarship and loan programs, and athletic and other school-administered programs.