

Admission Application

AL GIPP

Haskell Indian Nations University

Application for Admissions

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

DEADLINES: Fall – June 1 Spring – November 15 Summer – April 15

What semester are you planning to attend Haskell? Fall 20__ Spring 20__ Summer 20__

Legal Name: (as appears on legal documents, i.e. birth certificates, court documents)

Last Name First Name Middle

Maiden/Other Names Social Security Number

Please select which degree you are pursuing: Associate of Arts (A.A.) Degree Bachelor of Arts (B.A.) Degree
 Associate of Science (A.S.) Degree Bachelor of Science (B.S.) Degree

Please write your major on the line. _____

Permanent Mailing Address:

Street or P.O. Box City State Zip Code

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Telephone E-Mail Address

Please select the your enrollment status: Full-Time Student (Enrolled in 12 or more credits) Part-Time Student (Enrolled in less than 12 credits)

Please select the your housing status: On-Campus (Must be enrolled in 12 credits) Off-Campus (Please list local address below.)

Street or P.O. Box City State Zip Code

In case of an emergency, please provide the following information:

Parent Spouse Other:

Last Name First Name Please write relationship.

Street or P.O. Box City State Zip Code

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Telephone E-Mail Address

Demographic Information

Date of Birth: Place of Birth

/ / City State

MM/DD/YYYY

Gender: Male Female **Marital Status:** Single Married Separated Divorce

Are you currently on or pending criminal probation or parole? No Yes

If yes, explain: _____