

The following documents must be submitted to the Admissions Office (admissions@navajotech.edu) to be considered for enrollment to Navajo Technical University:

- ☐ Completed Admissions Application (Online application is also available on the website)
- ☐ Tribal Enrollment Document (CIB copy)
- ☐ Social Security Card (copy)

Transcript Submission:
 Official high school transcripts or GED test scores, as well as official college/university transcripts, should be sent to **NTU Admissions/Registrar's Office, PO Box 849, Crownpoint, NM 87313** or send electronic transcripts to **NTU Admissions** at **admissions@navajotech.edu**:

- ☐ Official High School Transcript or GED Test Scores – Must be sealed in an envelope.
- ☐ Official College Transcript For Transferring Student – Must be sealed in an envelope.

All required documents will be kept on file and you will receive an Official Letter of Acceptance upon completing your admittance.

Admissions Office: admissions@navajotech.edu

Placement Testing			
Main Campus: Academic Advisor Department (w): (505) 387-7401/7470	Kirtland Instructional Site: Quentin Bowman-Martinez (w): (480) 716-7130 qbmartinez@navajotech.edu	Chinle Instructional Site: Admissions (w): (928) 882-3134	Zuni Instructional Site: Laura Leekela (w): (505) 782-6020/6010 lleekela@navajotech.edu

Please visit our website at **www.NAVAJOTECH.edu** for more information on admissions.

NOTE: New incoming freshman are required to take a Placement Exam (Accuplacer) or provide ACT's before registering for classes. Students will also need to complete their financial aid packets prior to registration.

NTU SITE LOCATIONS

MAIN CAMPUS P.O. Box 849 Crownpoint, NM 87313 (505) 387-7401	KIRTLAND SITE 40 Road 6580 Kirtland, NM 87417 (505) 609-5020	CHINLE SITE P.O. Box 849 Chinle, AZ 86503 (928) 674-5764	TEEC NOS POS SITE P.O. Box 848 Teec Nos Pos, AZ 86514 (928) 656-3600	ZUNI SITE P.O. Box 1109 Zuni, NM 87327 (505) 782-6020
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NTU APPLICATION FOR ADMISSION

ADMISSION USE ONLY | Received by

Initials: _____

Date: _____ NTU ID: _____

What campus/site will you be attending: _____

Term you plan to enroll & register for? _____

PERSONAL INFORMATION

Full Name: _____

Mailing Address: _____ City: _____ State: _____ Zip Code: _____

Email Address: _____ Phone Number: _____

Social Security Number: _____ Date of Birth: _____ Gender: ☐ Female ☐ Male

U.S. Citizenship: ☐ Yes ☐ No Citizen of: _____

First Generation Student: ☐ Yes ☐ No State of Residence: _____ County: _____

Marital Status: ☐ Married ☐ Single ☐ Divorced ☐ Separated

Are you a Veteran: ☐ Yes ☐ No

Do you require special accommodations: ☐ Yes ☐ No
(Students with disabilities contact the Accommodation Specialist)

Branch: _____

ETHNICITY INFORMATION

What is your ethnicity: ☐ Hispanic/Latino ☐ Non-Hispanic/Latino

If you selected not Hispanic, please check all that apply:

☐ American Indian/ Alaskan Native ☐ Native Hawaiian or other Pacific Islander ☐ Black or African American

☐ White ☐ Asian ☐ Other: _____

Are you an enrolled member of a federally recognized tribe? ☐ Yes ☐ No

If so, Tribe: _____ Census/Enrollment Number: _____

Chapter Affiliation: _____ Tribal Agency: ☐ Eastern ☐ Western ☐ Ft. Defiance ☐ Chinle ☐ Shiprock

How well do you speak your tribal language: ☐ None ☐ Basic ☐ Intermediate ☐ Fluent

EMERGENCY CONTACT

Name #1: _____ Relationship to you: _____

Email Address: _____ Phone Number: _____

Name #2: _____ Relationship to you: _____

Email Address: _____ Phone Number: _____

HIGH SCHOOL/GED INFORMATION

Did you graduate from High School: ☐ Yes ☐ No Graduation Date: _____

High School Name: _____

City: _____ State: _____ Zip Code: _____

Did you earn a GED: ☐ Yes ☐ No Testing Site: _____ GED Test Date: _____

COLLEGE INFORMATION (TRANSFER STUDENTS)

Have you attended/registered at another college/university whether credit was earned or not? ☐ Yes ☐ No

IF YES, please provide the following information for each institution. You are required to submit an official transcript for all institutes you attended. LIST ALL COLLEGES, UNIVERSITIES & TECHNICAL SCHOOLS ATTENDED IN ANY STATUS.

Name of Institution	City & State	From	To	Degree Received

STATUS INFORMATION

Admission Status

- ☐ New - Never attend NTU/NTC/CIT
- ☐ Transfer - from another College/University
- ☐ Readmissions attended NTU/NTC/CIT/Dual Credit (select below)
- ☐ NTU (Navajo Technical University) ☐ NTC (Navajo Technical College)
- ☐ CIT (Crownpoint Institute of Technology) ☐ Dual Credit

Please select your enrollment status:

- ☐ Full-Time Student (12 credits or more)
- ☐ Part-Time Student (less than 12 credit hrs.)

INTENDED FIELD OF STUDY

Program/Major: _____

☐ Non Degree Seeking

HOW DID YOU HEAR ABOUT US?

- ☐ Campus Tour ☐ Newspaper ☐ College/Career Fair ☐ High School Fair/Presentation ☐ Referral
- ☐ Walk-In ☐ Radio ☐ Internet ☐ Tribal Fair ☐ Other: _____

PHOTO RELEASE

I hereby grant permission to Navajo Technical University the right to use, publish, display, and or produce any video recorded or photographs for promotional publication, alumni publication and or on the Navajo Technical University Web site or Facebook Page.

Student's Signature: _____

Date: _____

DRUG FREE AFFIDAVIT (REQUIRED SIGNATURE)

Navajo Technical University is a Drug Free Campus. In Compliance with the Drug-Free School and Campuses Act, commonly known as Part 86 of EDGAR (34 CFR Part 86), as a condition to receive funds or any other form of financial assistance under federal program.

The unlawful use, possession, manufacture, or distribution of alcoholic beverages, illegal drugs, and the possession of drug paraphernalia are strictly prohibited by Navajo Technical University policy and procedures, The Navajo Nation Code, State and Federal Laws. Under no circumstances will the use of any drugs and/or alcohol be allowed anywhere on campus. The use of drugs and/or alcohol is prohibited at all times on campus or at any school sponsored activity, including educational trips. Violation of the Drug Free Policy will result in the appropriate disciplinary action(s) as outlined in the Student Handbook and Employee Handbook.

I CERTIFY THAT I HAVE READ THE ABOVE STATEMENT AND UNDERSTAND THE CONDITIONS OF THE DRUG FREE CAMPUS POLICY.

Student's Signature: _____

Date: _____

SIGNATURE VERIFICATION

Please sign and date your application, without a signature and date your application will not be processed.

I CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

Student's Signature: _____

Date: _____