INTERNATIONAL APPLICATION FOR ADMISSION

NAVAJO TECHNICAL UNIVERSITY
P.O. Box 849
Crownpoint, NM 87313
(505) 786-4100 FAX (505) 786-5644

Year 20____
( ) Fall
( ) Spring
( ) Summer

Campus/Site/Location:
( ) Crownpoint
( ) Chinle

ID#_____

NAME: Last or Surname *(as it appears on your passport)* **First or Given Middle**	**Date of Birth:** (MM/DD/YY)	**Social Security Number:**
International Permanent Mailing Address: (PO Box/Street, City, State, Zip)	**Current Mailing Address:** (PO Box/Street, City, State, Zip)	
E-Mail Address:	**Predominant Ethnic Background:** ***(Federal law requests this information for statistical reporting purposes. Your response is voluntary.)***	
Phone Numbers: Cell:_____ Home:_____ Work:_____	**Ethnic:** □ Hispanic/Latino □ Non Hispanic/Latino	
Country of Citizenship: / **Country of Birth:** / **Gender:** □ Male □ Female	**Marital Status:** □ Single □ Married □ Widowed □ Separated □ Divorced / **Other Info:** First Generation Student? □ Yes □ No	**Race:** □ American Indian / Alaskan Native Tribe:_____ Census/Roll No:_____ □ Asian □ Black or African American □ Native Hawaiian or other Pacific Islander □ White
Are you currently in the United States? □ Yes □ No **If yes, what is your immigration status?**		**Veteran** □ **Yes** □ **No** □ **Active** □ **Retired**
□ **Commuter**		**Branch:** _____
Do you require Special Accommodations? □ Yes □ No Students with disabilities contact the Special Needs Counselor at (505) 786-4138		**Admission Status** □ New-Freshman □ Readmission- After absence □ Transfer- from another College/University

EDUCATION (*Must Provide Official transcripts translated in English*)

HIGH SCHOOL: (Name, City, State)	**Received GED?** □ Yes □ No
Graduation Date: _____	**Year Completed:** _____

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. *(All transcripts must be translated into English)*

Name of College: (Name, City, State)	**Dates of Attendance:**
Name of College: (Name, City, State)	**Dates of Attendance:**

OVER

Have you ever been suspended from any college or university (including NTU) for any reason?
□ Yes □ No

Name of Institution: _____ **Date:**_____
□ Academic □ Disciplinary

INTENDED FIELD OF STUDY:

1. Program/ Major: _____ ( ) Non Degree Seeking
(Declared Major)
2. Degree:
( ) AA Degree ( ) BA Degree ( ) Certificate
( ) AAS Degree ( ) BAS Degree
( ) AS Degree ( ) BFA Degree
( ) BS Degree (Certificate & Degrees listed on Website)

How did you hear about us?

□ Radio □ Newspaper □ College/Career Fair □ Tribal Fair □ Internet □ Referral

□ Campus Tour: _____ □ Walk In □ HS Fair/Presentation □ Other: _____

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

_____ _____
APPLICANT'S SIGNATURE **DATE**

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