300-Admissions/Records
(505) 346-2338

Application for Admission

SOUTHWESTERN INDIAN POLYTECHNIC INSTITUTE
"A National Indian Community College"
United States Department of the Interior
Bureau of Indian Education
Mailing Address: P.O. Box 10146; Albuquerque, NM 87184
Physical Address: 9169 Coors Boulevard, N.W.; Albuquerque, NM 87120

Which trimester do you intend to begin taking courses?
❑ FALL (Sept-Dec) ❑ SPRING (Jan-April) ❑ SUMMER (May-Aug) YEAR: _____

I am applying as a:
❑ New Student ❑ Concurrent Student (HS)
❑ Readmit Student ❑ Non-degree Student
❑ Transfer Student

Legal Name (Last, First, Middle)	Maiden Name / Previous Name

Legal or Permanent Address (Number, Street, Rt., Box, City, State, Zip Code)	Telephone No. ( )
Commuter Address While Attending SIPI (Number, Street, Rt., Box, City, State, Zip Code)	Commuter Telephone No. ( )
E-mail Address While Attending SIPI	Cell Telephone No. ( )

Sex (Check One) ❑ MALE ❑ FEMALE	Place of Birth (City, State)	Date of Birth (Mo., Day, Yr.)	U.S. Social Security No.

Are you a member of a U.S. Federally Recognized Tribe? ❑ YES ❑ NO
If YES, Please provide a copy of Certificate of Indian Blood (CIB) with application.

Name of Tribe:

Notify in Case of Emergency (Name, Address)	Relationship	Telephone No. ( )

Circle Highest Grade Completed in High School:
7 8 9 10 11 12

High School Graduation Date (Mo., Day, Yr.):

Name and Address (City, State) of Last High School Attended:

Please, provide a copy of official High School transcript showing graduation date.

If you have NOT graduated from High School, Have you passed a GED test? ❑ YES ❑ NO
If YES, Please provide a GED report of Test results. You must be 18 years of age or older to apply for the GED program.

Have you attended College? ❑ YES ❑ NO *If YES, Please complete the table below:*

FOR TRANSFER AND READMISSION STUDENTS ONLY: List all post-secondary schools, colleges, and universities in order of attendance. Transfer students MUST submit an OFFICIAL college transcript.

Name of School	Address (City, State)	Dates Attended	Credits Earned

GENERAL INFORMATION – PLEASE ANSWER ALL QUESTIONS

Are you a U.S. Veteran? ❑ YES ❑ NO
If YES, Please provide a copy of latest DD-214 Form with application.

Are you currently on or pending Criminal Probation or Parole? ❑ YES ❑ NO
If YES, Please Explain:

Will you require student dormitory housing? ❑ YES ❑ NO
If YES, Housing Application must be completed and submitted with application.

OMB Control No: 1076-0114
Expiration Date: 09/30/2029

GENERAL STUDENT BACKGROUND SURVEY – PLEASE ANSWER ALL QUESTIONS

What is your current marital status?	Are you a single parent?	Do you speak your tribal language?
☐ SINGLE ☐ MARRIED	☐ YES ☐ NO	☐ YES ☐ NO

Do you reside on your tribal reservation?	Are you the first generation of your family to attend a post-secondary educational institution?
☐ YES ☐ NO	☐ YES ☐ NO

Select the highest level of education for each parent/guardian:

Mother's Education:

- ☐ Completed High School Diploma or GED Equivalent
- ☐ Completed a Certificate (approximately 1-year training)
- ☐ Completed an Associate Degree (2-year college degree)
- ☐ Completed a Bachelor's Degree (4-year college degree)
- ☐ Completed a Graduate Degree
- ☐ Not Applicable

Father's Education:

- ☐ Completed High School Diploma or GED Equivalent
- ☐ Completed a Certificate (approximately 1-year training)
- ☐ Completed an Associate Degree (2-year college degree)
- ☐ Completed a Bachelor's Degree (4-year college degree)
- ☐ Completed a Graduate Degree
- ☐ Not Applicable

Assessment Survey:

What is your current objective in attending SIPI? Please Check the box next to any or all of the statements that apply to you.

- ☐ Obtain a Certificate
- ☐ Obtain an Associate Degree
- ☐ Transfer to another college or university
- ☐ Preparation to change careers
- ☐ Self-improvement and/or to improve basic skills
- ☐ Preparation to enter the job market
- ☐ Meet certification/licensure requirements
- ☐ Personal interests
- ☐ Explore courses
- ☐ Improve skills for present job
- ☐ Undecided/unknown

CERTIFICATION:

This verifies that all application information I submitted to Southwestern Indian Polytechnic Institute (SIPI) is complete and true. Reporting any false application information may be grounds for denying admission or suspension from the institution. I also agree to abide by all of the rules and regulations of SIPI.

Applicant Signature (sign) | Social Security Number | Date

FOR PARENT/GUARDIAN OF A MINOR APPLICANT UNDER 18 YEARS OF AGE:

I am legally responsible for this applicant and hereby apply for his/her admission to SIPI. I give my consent to emergency operations, psychiatric treatment, and dental or minor surgery, if such procedures become necessary while the student is in college. I also approve inoculations and treatment in the field of preventive medicine as may be deemed necessary by medical personnel.

Parent/Legal Guardian Signature | Relationship | Date

( )

Address (Number, Street, Rt., Box, City, State, Zip Code) | Telephone No

STUDENTS WITH DISABILITIES

Southwestern Indian Polytechnic Institute ensures access to facilities and academic programs for students identified by the American Disabilities Act. Accommodations are determined on an individual basis and include, but not limited to, sign language interpreters, note takers, audio recording, tutorial services, priority registration, parking, and classroom modification. Please contact the Vocational Rehabilitation Counselor by phone at (505) 346-2319, regarding disability. The Counselor can arrange for and monitor needed services in compliance with the American Disabilities Act.

Southwestern Indian Polytechnic Institute

P.O. Box 10146, Albuquerque, NM 87184

1-800-586-SIPI

Physical Examination Form - To be filled out by Physician

1. NAME (LAST, FIRST, MIDDLE)	2. NAME OF SCHOOL		3. REGISTRATION NO.
4. OTHER NAMES USED (LAST, FIRST, MIDDLE)	5. DEGREE OF BLOOD	6. TRIBE	7. TRIBAL ID NO.
8. PERMANENT ADDRESS OF PARENT OR GUARDIAN			9. DATE OF EXAM

10. PLACE OF BIRTH	11. DATE OF BIRTH	12. AGE	13. SEX	14. OTHER CLINIC OR SCHOOL ATTENDED

15. FATHER'S NAME	16. PLACE OF BIRTH	17. MOTHER'S MAIDEN NAME	18. PLACE OF BIRTH

19. SIGNIFICANT FAMILY HISTORY (List tuberculosis, venereal disease, diabetes, epilepsy, trachoma in family. Also if parents not living, indicate cause of death.)

20. SIGNIFICANT PERSONAL HISTORY (List, with dates where possible, history of rheumatic fever, chorea, tuberculosis, asthma, convulsive disorder, diabetes, otitis media, pneumonia, trachoma, other serious illness or hospitilization and menstrual history.)

21. SIGNIFICANT SOCIAL HISTORY:

MEASUREMENTS AND OTHER FINDINGS

22. HEIGHT	23. WEIGHT	24. BUILD				25. BLOOD PRESSURE (Arm at heart level)	
		SLENDER	MEDIUM	HEAVY	OBESE	A. Systolic	B. Diastolic

26. PSYCHOLOGICAL AND PSYCHOMOTOR (Tests used and score.)

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Physical Examination Form - To be filled out by Physician (Continued)

27. CLINICAL EVALUATION (Check each item in the appropriate columm.)

NORMAL	AB-NORMAL	NOT EVALUATED	ITEM	NOTES: (Describe every abnormality in detail. Enter pertinent item letter before each comment.)
			A. HEAD, FACE, NECK AND SCALP	
			B. NOSE	
			C. SINUSES	
			D. MOUTH AND THROAT	
			E. EARS - GENERAL	
			F. DRUMS (Perforation)	
			G. EYES - GENERAL (include examination for Trachoma)	
			H. OPTHALMOSCOPIC	
			I. PUPILS AND OCULAR MOTILITY	
			J. LUNGS AND CHEST	
			K. HEART AND VASCULAR SYSTEM	
			L. ABDOMEN AND VISCERA (include hernia)	
			M. ANUS AND RECTUM	
			N. ENDOCRINE SYSTEM (include indication of puberty)	
			O. G-U SYSTEM	
			P. UPPER EXTREMITIES	
			Q. FEET AND LOWER EXTREMITIES	
			R. SPINE, OTHER MUSKULOSKELETAL	
			S. IDENTIFYING BODY MARKS, SCARS, TATOOS	
			T. SKIN LYMPHATICS	
			U. NEUROLOGIC	
			V. PSYCHIATRIC (specify any known personality deviation)	

28. SUMMARY OF DEFECTS AND DIAGNOSIS (List diagnoses with item letters. Include allergies, especially drug allergies.)

29. RECOMMENDATIONS (Further specialist examinations and follow-up indicated. Specify)

30. SIGNATURE OF EXAMINING PHYSICIAN & NAME OF FACILITY OR CLINIC	DATE

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APPLICATION FOR RESIDENTIAL HOUSING

GOLDEN EAGLE LODGE OR FOUR WINDS LODGE
SOUTHWESTERN INDIAN POLYTECHNIC INSTITUTE
9169 COORS BLVD NW
ALBUQUERQUE, NM 87184
Housing & Recreation Office: (505) 346-2371 Director: (505) 346-2327
Golden Eagle Lodge: (505) 346-2354 Four Winds Lodge: (505) 346-2356

Office Use Only	
Admission Status	
Room #	
Key #	
Status:	A1
	A2
	A5

Applicants Name: _____ Social Security #: _____
(Last, First, Middle Initial)

Street/P.O. Box: _____ City: _____ State: _____

Phone Number: _____ Cell: _____ Zip: _____

****STUDENTS MUST BE 18 YEARS OLD TO RESIDE IN DORM AND BE ENROLLED IN 12 CREDIT HOURS****

Residential Lodge Request Period: Year: _____ Spring: _____ Summer: _____ Fall: _____

Male (Golden Eagle): ☐ Date of Birth: _____ Age: _____
Female (Four Winds): ☐

New Student: ☐ Continuing Student: ☐ Readmit Student: ☐

Last Year Attended SIPI: _____

EMERGENCY CONTACT INFORMATION

Name: _____ Relationship: _____
(Last, First, Middle Initial)

Address: _____ City: _____ State: _____

Home Phone: _____ Work Phone: _____ Zip: _____

MEDICAL INFORMATION

Please list any medical problems and physician prescription medications:

_____

_____

SPECIAL ACCOMMODATIONS: *For Students needing handicap accessible rooms, please contact the Housing & Recreation Staff, at the number listed above.*

ADDITIONAL INFORMATION NEEDED

HAVE YOU EVER BEEN CONVICTED OF ANY FELONY AND/OR CURRENTLY ON PAROLE/PROBATION? YES NO

If yes please explain: _____

_____

_____

THE $275.00 STUDENT HOUSING FEE MUST BE PAID IN THE STUDENT ACCOUNTING OFFICE PRIOR TAKING OCCUPANCY.

All fees must to be paid by Money Order. (PAYABLE TO BIE/SIPI) NO Cash will be accepted.

SIPI recognizes alcohol and drug abuse as a potential health, safety, and security problem to the students and the SIPI community. As such, on June 3, 1991, the SIPI Board of Regents passed Resolution 148 entitled "Zero Tolerance" an alcohol and Illegal Drug Policy. If a student violates any part of the articles and is found guilty, suspension from the Lodge will occur.

Student Signature: _____ Date: _____

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Transfer Credits

Grades earned in courses taken at other institutions are not included in the calculation of SIPI grade point average. Official high school and college transcripts submitted to the Admissions Office become the property of the College and will not be copied, transferred, or returned to the student.

Evaluation of Credit

Before previous coursework can be considered for transfer, admissions must receive official transcripts from all schools where the coursework was completed. Any student requesting transfer credit must contact his/her academic advisor, who will review the course(s) for which transfer credit has been requested. If the advisor determines that the course(s) meet the requirements of the student's program of study, the advisor will complete a SIPI College Course Credit Transfer form. The signed form will be routed to the department chairperson, the Vice President of Academic Programs, and the Admissions Office for final approval.

Transfer Credits

Before a course from another institution will be accepted toward a SIPI certificate or degree, the following requirements must be satisfied:

- Admissions must receive official transcripts from all schools where coursework was completed.
- The academic advisor will evaluate the transfer credits to determine which transfer credits may be applied toward the student's program of study.
- Transfer credits in any degree program of study offered by SIPI must have a letter grade of C or higher, provided the classes are similar or equivalent to courses offered at SIPI.
- A minimum of 24 residency hours in a core area is required for the award of a certificate or degree.
- Official transcripts submitted to SIPI Admissions and Records become the property of the institution and will not be transferred or returned to the student.
- Only credits from regionally accredited institutions are transferrable.
- To receive transfer credit for career and technical courses, the student must request a copy of the transcript(s) from the SIPI's Admissions Office and submit them to the appropriate academic division for review. An interview and/or demonstration of competence may be required before the decision regarding credit is made. Demonstration of competence is required for all transfer credit more than 10 years old**.**
- Remedial courses and upper-division courses, 300 & 400 levels, are not generally transferable.

Quarter System Evaluation

SIPI operates on a trimester academic year. Transfer courses from a post-secondary institution that uses a quarter system will be recalculated to trimester hours (one quarter hour equals 2/3 (0.66) trimester hour) to determine acceptability.

Military Credits

Credit for military service is granted to those students who have served in the armed forces. Credit for Physical Education (1 credit) and Health (2 credits) may be granted, provided the course(s) is/are part of the student's program of study. The prospective student must provide a Department of Defense Form 214 (DD Form 214), to the Director, Admissions and Financial Aid during the application process.

Office of Admissions
Southwestern Indian Polytechnic Institute
P.O. Box 10146, 9169 Coors Rd NW
Albuquerque, NM 87184
(505)346-2324

Request for Non-Disclosure of Directory Information

The Southwestern Indian Polytechnic Institute, SIPI Re: Privacy Holds:

"At its discretion Southwestern Indian Polytechnic Institute may provide *directory information* in accordance with the provisions of the *Family Educational Rights and Privacy Act*. Directory information is defined as that information which would not generally be considered harmful or an invasion of privacy if disclosed. Designated directory information at University of X includes the following: student name, permanent address, local address, temporary address, electronic mail address, telephone number, dates of attendance, degrees and awards received.

Students may withhold directory information by notifying the Registrar in writing; please note that such withholding requests are binding for all information to all parties other than for educational purposes. Students should consider all aspects of a *directory hold* prior to filing such a request. Although the initial request may be filed at any time, requests for non-disclosure will be honored by the SIPI until removed by the student."

Please consider very carefully the consequences of any decision by you to withhold any category of directory information. Such designation will call for SIPI not to release any or all of this directory information; any future requests for such information from non-institutional persons or organizations will be refused.

SIPI will honor your request to withhold any of the categories listed below but cannot assume responsibility to contact you for subsequent permission to release them. Regardless of the effect upon you, SIPI assumes no liability as a result of honoring your instructions that such information be withheld.

Please mark the appropriate boxes and affix your signature below to indicate your disapproval for the institution to disclose the following directory information:

- ☐ student name
- ☐ permanent address
- ☐ local address
- ☐ temporary address
- ☐ electronic mail address
- ☐ telephone number
- ☐ photo
- ☐ dates of attendance
- ☐ degrees and awards received
- ☐ **all** directory information listed above

DATE _____ STUDENT NAME _____

SEMESTER/QUARTER _____ YEAR _____ STUDENT SIGNATURE _____

Note: Requests for non-disclosure will be honored by the SIPI for no more than one academic year. Re-authorization to withhold directory information must be filed annually in the Office of the Registrar within the first two weeks of the fall semester.

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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 30 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 SIPI Admission, P.O. Box 10146, Albuquerque, NM 87184. 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 consent of the respondent. The primary purpose and routine uses of this information is to determine eligibility for postsecondary educational services of the Southwestern Indian Polytechnic Institute, 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.