



APPLICATION FOR ADMISSION

Stone Child College
8294 Upper Box Elder Road
Box Elder, MT 59521
(406) 395-4875 ext. 264
Fax: (406) 395-4836

Website: www.stonechild.edu

Please Note: Changes will not be saved, document must be printed after filling in own information and submitted to the Registrar.

Please print clearly, check all that apply. An incomplete application will not be processed.

Social Security Number: _____

Freshman: _____

Sophomore: _____

Transfer: _____

Name: _____
Last Name First Middle Initial

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

Email address: _____

Home Phone: _____ Other contact Phone: _____

Male: _____ Female: _____ Single: _____ Married _____

Birth Date: _____ American Indian ___ Yes ___ No Tribe: _____

Emergency Contact: _____
Name Address Phone

Are you a United States citizen? _____ Yes _____ No

Semester you expect to enroll: _____ Fall _____ Spring _____ Summer _____ Year

Have you completed your Financial Aid packet? _____ Yes _____ No

Which state are you a resident of? _____

What year and state did you last file taxes? _____

Have you ever been convicted of a felony? Yes _____ No _____

If you answered yes, what were you convicted for? _____

Please Check One:

EDUCATIONAL HISTORY

_____ Please indicate last time you attended Stone Child College. Year graduated: _____(if a prior graduate)

_____ Ability to Benefit (No High School Diploma or GED Certificate)

Please circle highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12

Name of school attended: _____

_____ High school graduate. Official HS transcripts must be on file.

High school name/location: _____

Year graduated: _____

_____ GED Certification. Official GED must be on file.

Location City/State Obtained: _____

Year earned: _____

_____ Other college credits earned and/or degrees earned:

Name of College	Address,Website	Dates Attended	# Credits Earned	Degree Earned

Application Process:

1. Student must have requested all transcripts from previous college, high school or GED program, before registration for courses is allowed.
2. Student must have official Certificate of Indian Blood if enrolled in a U.S. federally recognized Indian tribe.
3. Proof of immunization record showing student has received Measles, Mumps, Rubella 1 and 2 (MMR 1 and MMR 2). Applies to student born after January 1,1957. If you claim immunization exemption, please notify the Registrar/Admission's Office for the proper immunization exemption form.
4. Student must take the ACT/COMPASS test prior to Registration for courses.
5. Application for Admission must be completed, signed, and dated. Incomplete Applications for Admissions will be put on hold and will not be processed until completed by the student.
6. Conditional Admission is granted through Registrar/Admission's Office Only.

I hereby apply for admissions at Stone Child College and agree to abide by the institution's regulations, policies and procedures. To the best of my knowledge all information provide on this application is true.

Student Signature

Date