



Nottawaseppi Huron Band of the Potawatomi
A Federally Recognized Tribal Government

Education Department and Committee
 2221 1 1/2 Mile Road, Fulton, Michigan 49052
 Phone: (269) 729-5151 • Fax: (269) 729-4837

2011-2012 Adult Education Application

Student Information

Student's Legal Name (Last, First)	Social Security Number		
Permanent Address	City	State	Zip Code
Telephone Number(s)	E-mail Address	Date of Birth (mm/dd/yyyy)	
Tribal ID number			

Statistical Information

<i>Please check all that apply:</i> Single: <input type="checkbox"/> Married: <input type="checkbox"/> Separated: <input type="checkbox"/> Number of dependants under 18: _____ Currently employed: <input type="checkbox"/> If no, unemployed # of weeks: _____ discharge _____ If employed: Employer _____ Position _____ Employed since _____ High school _____ HS Graduation date _____ or GED completion date _____ Highest level of completed education _____ Date _____	<i>Circle one:</i> Male / Female	<i>Check one/Fill in the blanks:</i> U.S. Citizen: Yes <input type="checkbox"/> No <input type="checkbox"/> Currently employed: Yes <input type="checkbox"/> No <input type="checkbox"/> Selective Service # _____ Veteran: Yes <input type="checkbox"/> No <input type="checkbox"/> If applicable, date of _____
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Adult Education Information

Adult Education Course	Name of Provider	Completion Date		
Address	City	State	Zip Code	Website

Authorization

I certify that the information given is true to the best of my knowledge. I understand that this information may be confirmed. Any State, Federal, Local Agency, or former employer is free to release information about me regarding this application. I understand that if I have deliberately given false information, I may receive a fine, imprisonment, or both. This is the authorization to disseminate employment and educational information for the purpose of assisting me in obtaining assistance, training, education, or employment. I also agree that the tribe may share contact information with other Huron Potawatomi departments.

<i>Applicant Signature</i>	<i>Guardian's Signature if under 18</i>	<i>Date</i>
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