A tiger with its mouth open

Description automatically generated with medium confidence

**KINTEEL RESIDENTIAL CAMPUS INC**

**STUDENT ADMISSION PACKET**

**2023 - 2024**

1600 Lydia Rippey Road **,** Aztec, N. M. 87410

Ph: (505) 334-6565 Fax: (505) 334-8630

Admission Policy

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### 1. Admission to Kinteel Residential Campus, Incorporated (KRCI) is based on space availability in the dormitory by gender, ages from 13 to 18, and from 8th through 12th grade.

### 2. Admission for Native American students that have minimum of a

### **2.0 GPA and above,** are in good character standing and **do not** have past **behavior problems.** Consideration is given to the applicant’s strong academic abilities, leadership, contributions made to his/her previous

### school and evidence of independence and maturity.

### 3. Student Enrollment Application Packets are reviewed for admission in the order they are received. Incomplete application packets will be put on Pending until all documents are submitted. Enrollment hours are Monday through Friday from 8:00 a.m. to 4:30 p.m. The Admission Committee will notify the student and parents if the student has been accepted or not.

### 4. Enclosed is a "Student Enrollment Check-Off List" form to help you complete your enrollment packet. You can also go online www.kinteel.org to download an application.



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### **STUDENT ENROLLMENT APPLICATION**

### **SY 2023-2024**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **STUDENT IDENTIFICATION GRADE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Name of Student:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Last) (First) (Middle)

Tribe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Degree of Indian Blood: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Census #: \_\_\_\_\_\_\_\_\_\_\_\_\_ Sex: Male\_\_\_\_\_\_\_\_\_ Female \_\_\_\_\_\_\_\_

Birthdate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birthplace:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Month) (Day) (Year) (City and State)

P.O. Box # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ***OR*** Street Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State\_\_\_\_\_\_\_\_\_ Zip Code\_\_\_\_\_\_\_\_\_

Home/Cell Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parent Work#: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chapter Affiliation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Home Agency\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Relationship:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(***Name of Person Whom the Student Lives With)***

**Emergency Contact (*when parents cannot be reached and must be working numbers*)**

Please list other relatives who may be contacted

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_Telephone: \_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_Telephone: \_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_Telephone: \_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_Telephone: \_\_\_\_\_\_\_\_\_\_\_\_

**2. FAMILY AND BACKGROUND INFORMATION**

|  |  |
| --- | --- |
| Father | Mother |
| Address | Address |
| Tribe Census | Tribe Census |
| Chapter | Chapter |
| Home Agency | Home Agency |
| Employer | Employer |
| Phone: | Phone: |
| Work Phone #: | Work Phone #: |

Please list names of **other siblings** that are currently attending Kinteel Residential Campus, Inc:

|  |
| --- |
| Brother or Sister : Grade : |
| Brother or Sister: Grade : |

Please list names of **other family members** that are currently attending Kinteel Residential Campus, Inc.:

|  |
| --- |
| Relative: Grade : |
| Relative: Grade: |

**3. SCHOOLS PREVIOUSLY ATTENDED:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Name | City, State | Grade(s) | Year(s) | Reason for Leaving |
| High School  **(12)** |  |  |  |  |  |
| High School  **(11)** |  |  |  |  |  |
| High School **(10th)** |  |  |  |  |  |
| High School **(9th)** |  |  |  |  |  |
| Junior High School **(8th)** |  |  |  |  |  |



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KINTEEL RESIDENTIAL CAMPUS, INC.

### **CERTIFICATION OF RESIDENT**

I certify that my son/daughter\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and other members of my family

(Name)

are legal residents in the State of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and a member of the\_\_\_\_\_\_\_\_\_\_

Chapter and \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Agency.

**Please draw a map to your home:**



\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/ Legal Guardian Signature­­­ DateCIAL HISTORYCIAL r an interview with the Executive Director.

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