



College of the Muscogee Nation

Mvskoke Etvlvv Nakcokv Mvvhakv Svhlwecvt

Name _____

Student ID _____

Trimester _____

Applicant Checklist

This checklist is provided in your Admissions packet as a guide to all documentation that is required. You may use the right side of the checklist as you are preparing for your visit.

New Application

Returning Student

AUDIT Only

CMN Use Student Use

DOCUMENTATION

_____ *OFFICIAL* high school transcripts or HS Equivalency test Score _____
 (Official transcripts are sealed and come directly from the high school. HSE Scores may be copies)

_____ Copy of ACT scores

_____ Assessment test scores (Waived if score is 19 or greater in each test area of the ACT)

_____ *OFFICIAL* college transcripts from each higher education institution
 (Official transcripts are sealed and come directly from the educational institution attended)

School Attended: _____		CMN	
School Attended: _____		Use	
School Attended: _____		Only	

_____ Copy of tribal citizenship card (Must be copied by CMN personnel) _____

_____ Copy of Driver's License or State issued ID _____
 (Birth certificate and Social Security Card may be substituted)

ADMISSIONS APPLICATION

_____ CMN Application complete Program _____

_____ Enrollment Agreement

_____ Vaccination Waiver or Shot Records / Authorization for Medical Treatment

_____ CMN Residential Life Contract (if applicable)

FINANCIAL AID (If applicable)

_____ FAFSA Complete (Free Application for Federal Student Act) <http://www.fafsa.ed.gov>

School Code: 042249

_____ CMN Scholarship Application [Must be enrolled in the Muscogee (Creek) Nation.]

_____ CMN Tuition Waiver/Grant Application (Must be an enrolled member of a federally recognized tribe.)

*In accordance with the American with Disabilities Act, CMN provides equal access to its programs, services, and facilities to students, employees, and members of the public, regardless of disability. Requests for accommodations will require further documentation.

FYI:

We encourage our students to seek outside scholarships through:
 The American Indian College Fund at www.collegefund.org
 Your tribal education office

For CMN Use Only	Student Master	Applicant Folder	Doc Tracker	Emergency	Secondary Email
	Test Scores	Education Folder	Letter	School Fields	Enrollment Wiz
	Transcripts	IEP	FERPA	IC	NAR



College of the Muscogee Nation

Special Application

PO Box 917
2170 Raven Circle
Okmulgee, OK 74447
(918) 549-2847
Fax (918) 759-6941
admissions@cmn.edu
TDD/TTY - 711

Trimester: Spring 20 _____ Summer 20 _____ Fall 20 _____ Audit Only

Please print or type all information. Students must complete the entire application and sign the reverse side of this form for application to be valid.

Applicant Information			
Last Name: _____ MI: _____ First Name: _____			
Social Security Number: _____ Date of Birth: _____ Prior Name(s): _____			
Mailing Address: _____ County: _____			
City: _____		State: _____ Zip Code: _____	
Home Phone: _____		Cell Phone: _____	
Email: _____			
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female		Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married	
		<input type="checkbox"/> With Children at Home <input type="checkbox"/> With Adult Children	
Emergency Contact Person (<i>Relationship to you</i>)		Address	
		Telephone # (Home) (Work)	
<p>Please mark all that apply Are you Hispanic or Latino? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Ethnicity: <input type="checkbox"/> American Indian or Alaskan Native Tribal Affiliation: _____</p> <p><input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian/Pacific Islander <input type="checkbox"/> White</p> <p>Veteran: <input type="checkbox"/> Yes <input type="checkbox"/> No Are you active Military/Dependent? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><small>The above information is collected to comply with the Title VI of the Civil Rights Act of 1964 and Title IX of the Education Act of 1972 to be used for reporting purposes and does not determine admission to CMN.</small></p>			
State of Legal Residency: _____			
U.S. Citizen: <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If no, do you have permanent resident status?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No Nationality: _____			
Non-Academic Criteria			
<input type="checkbox"/> Yes* <input type="checkbox"/> No Have you ever been suspended, expelled, denied admission or re-admission from a college or university as a result of non-academic and/or non-financial issue?			
<input type="checkbox"/> Yes* <input type="checkbox"/> No Have you ever been convicted of a felony or lesser crime involving moral turpitude, or do you currently have any outstanding criminal charges or warrants of arrest pending against you in Oklahoma, another state or jurisdiction, federal or tribal court?			
*If yes to either question, please see Admissions for a Non-Academic Review Request form.			
*If a student has a felony conviction(s), then it <i>MAY</i> preclude said student from gaining employment within certain fields. Please be advised that a student with a felony conviction(s) may not be eligible for licensure and subsequent employment with a law enforcement agency or a gaming facility.			
Education Highest level: (Check one)			
<input type="checkbox"/> Some High School <input type="checkbox"/> High School or Equivalent <input type="checkbox"/> Some College/Technology Center <input type="checkbox"/> Associate's <input type="checkbox"/> Bachelor's <input type="checkbox"/> Postgraduate			
High School Attended: _____		Last College Attended: _____ Eligible to re-enroll? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Course Information *Student must provide proof of Academic Proficiency for desired course enrollment			
Course Name _____		Days of Course _____	
Course Name _____		Days of Course _____	
Course Name _____		Days of Course _____	

*In accordance with the American with Disabilities Act, CMN provides equal access to its programs, services, and facilities to students, employees, and members of the public, regardless of disability. Requests for accommodations will require further documentation.

Americans with Disabilities Act (ADA)

In accordance with section 504 of the Rehabilitation Act of 1973, and the Americans with Disabilities Act of 1990, CMN recognizes the fundamental principles of nondiscrimination and accommodation in academic programs. The Dean of Academic Affairs is the designated campus resource for verifying and coordinating reasonable academic accommodations for students with academic disabilities. The Dean of Student Affairs is the designated campus resource for verifying and coordinating reasonable accommodations for students with other disabilities. Students are required to submit documentation to process accommodations. Faculty members have an obligation to respond when they receive official notice of accommodations from the appropriate Dean's Office, but are under no obligation to provide retroactive accommodations. For more information contact the Dean of Academic Affairs at 918-549-2806 or Dean of Student Affairs at 918-549-2817.

Directory Information

Under the Family Education Rights and Privacy Act of 1974, you may restrict the release of your directory information. No other information will be released to a third party, except as provided by law, without your prior written consent. If you wish to restrict the release of your directory information, you must file a signed statement to that effect with the CMN Registrar's Office. For a full list of directory information, please see the CMN Catalog.

Media Release

I grant CMN irrevocable rights and permission to procure, use, publish, and retain copyright to all images, video, audio, and other likenesses of me for editorial, advertisement, reporting, and other purposes. If you wish to restrict the media release items above, you must file a signed statement to that effect with the CMN Registrar's Office.

Raven Alert

Raven Alert sends class cancellations and emergency notifications via text message, voice message, and CMN email. CMN does not charge students to send or receive text messages. Standard or other messaging charges apply depending upon your wireless carrier plan and subscription details. I understand that I may opt out of phone notifications at any time by visiting the CMN Student Affairs Office.

Computer Usage

I understand that use of CMN's computers, networks, and Internet access is a privilege granted by the college. I agree to follow the policies set forth by the CMN. I understand that violation of these policies may result in my network ID, password, and/or email address being removed from the server without notice. Anyone who accesses, uses, destroys, alters, or damages CMN information resources, properties, or facilities without authorization may be guilty of violating tribal, state, or federal law, and/or threatening the integrity of information kept within CMN's systems. Such conduct is unethical, and will result in disciplinary action by the college, including suspension, and/or loss of computing system privileges. For further details, refer to the CMN website under Consumer Information.

Bursar and Financial Aid

I consent to receive financial notifications from CMN via electronic means. I understand I may withdraw my consent by sending a written notice to the Bursar's Office. I further agree that the CMN Bursar's Office may endorse and deposit all financial checks issued and apply payment to my account. Any remaining amount would be refunded to me. I agree to report any outside scholarships received and funding sources to the CMN Financial Aid and Scholarships office.

Students Right to Cancel

The student has a right to cancel this enrollment agreement within the add/drop period and obtain a reversal of charges. If you wish to withdraw totally from the program, you may cancel this enrollment agreement by completing the Student Withdrawal Request. The bill will reflect any change in enrollment status and consequent tuition balance.

Student Agreement

- I understand that the school reserves the right to reschedule the start date of academic courses.
- I understand that the school may terminate my enrollment if I fail to comply with attendance, academic, and financial requirements or if I fail to abide by established standards of conduct, as outlined in the CMN Catalog and Student Responsibilities section of the Student Handbook. These documents are located on our website, CMN.edu, and a printed version available in the Student Affairs office.
- I declare that the information provided by me on this form is true, correct and complete to the best of my knowledge. It is my understanding that failure to list previously attended colleges or universities or the submission of false information and/or academic records is grounds for denial of admission or immediate suspension. I give release to CMN to obtain information in regards to my non-academic history and background.
- I agree to submit all required documentation, including those specifically listed and realize that failure to do so will result in a hold being placed on my academic records and denial of admission to CMN.
- I agree that the above information may be shared between CMN and Tribal/State/Federal Programs.
- I understand that I must maintain a GPA of 2.00 or higher in order to remain eligible for enrollment at CMN.
- Because it is at the receiving institution's discretion, I understand the College of the Muscogee Nation does not guarantee transferability of credits to a college, university, or institution. Any decision on the compliancy, appropriateness, and applicability of credit, and whether they should be accepted is the decision of the receiving institution.

This is to acknowledge that I agree to abide by all rules, regulations, policies, and practices set forth by the administration of CMN.

Signature

Parent/Guardian (If under 18 years old)

Date