



# ADMISSIONS CHECKLIST



- Application for Admission-** complete both the front AND back.
  
- HS/GED Transcript Request form for high or GED graduation verification-**  
This form gives us permission to request an official HS/GED transcript.
  
- Tribal Card** – If you are an Alaskan Native or American Indian, please provide a current copy of your tribal card or fill out the Ilisagvik Native Shareholder Verification form.
  
- Testing** – Applicants need to take an ACCUPLACER placement test. For an appointment to take the test contact Student Services at (907) 852-1779 [toll free in Alaska at (800) 478-7337, ext. 1779]. Testing can also be arranged in the villages by appointment.
  
- Meningitis Form-** read and sign.
  
- Financial Aid** – apply to get scholarships and other help with tuition at (907) 852-1708 [toll-free in Alaska at (800) 478-7337, ext. 1708].
  
- Contract/Application for Housing** – If you want to stay on campus in a dormitory room (double occupancy), you must apply for admission to the residential center. Contact Student Services, at (907) 852-1809 [toll free in Alaska at (800) 478-7337, ext. 1809].

*For questions or help, please contact the office of the Registrar / Admissions at (907) 852-1757 [toll free in Alaska at (800) 478-7337, ext. 1757] or via e-mail at [registration@ilisagvik.edu](mailto:registration@ilisagvik.edu).*







# APPLICATION FOR ADMISSION

Office of the Registrar  
P.O. Box 749 Barrow, AK 99723  
Phone: 907.852.1757 or 1771  
Fax: 907.852.1784  
registration@ilisagvik.edu

PLEASE PRINT CAREFULLY – Complete all information requested below.

**Office Use Only**

Received Date: \_\_\_\_\_

Semester (Check One):  Spring  Summer  Fall Year 20

\_\_\_\_\_  
Last Name First Name Middle Previous Names

Male  Female

\_\_\_\_\_  
Date of Birth (mm/dd/yyyy) Social Security Number

MAILING ADDRESS: \_\_\_\_\_  
Address City State Zip Code

\_\_\_\_\_  
E-mail Address Work Phone Cell Phone Home Phone

Marital Status:  Single without children  Single with children  Married without children  Married with children

Did your parents or guardians graduate from a four-year college or university?  Yes  No

Are you:  Shareholder of any Alaska native Corporation  Tribe member

Name of Corporation or Tribe \_\_\_\_\_ (Provide Verification)

Can you speak American Indian or Alaskan Native Languages?:

None  Limited  Conversational  Fluent

Ethnic Origin: (Check One)  Alaskan Native  African American  American Indian  Asian  Caucasian  
 Hawaiian  Hispanic  Pacific Islander  Other

Alaska Resident:  Yes (1 Year)  No Citizenship:  U.S. Citizen  Nonresident Alien \*Please Provide Verification

Active Military:  Yes  No If no, are you veteran:  Yes  No

Enrollment Status: (Check One)

Part-Time - 1 to 6 credits  Part-Time - 7 to 11 credits  Full -Time - 12 or more credits

Housing:

I plan to live off campus  
 I would like student dormitory housing (housing application needed)

## EDUCATION LEVEL COMPLETED

Please have transcripts of all past schools attended, including proof of high school graduation or G.E.D. certificate, sent to Ilisagvik.

High School Graduate Date: \_\_\_\_\_ Name of School: \_\_\_\_\_  
 G.E.D. Certificate Completion Date: \_\_\_\_\_ Site: \_\_\_\_\_  
 Associate Degree  Bachelor Degree  Master's Degree

TEST TAKEN: Please have results of test sent to Ilisagvik College Office of the Registrar.

ACCUPLACER  ACT  SAT  Other: \_\_\_\_\_



# APPLICATION FOR ADMISSION

## COLLEGES AND UNIVERSITIES ATTENDED LIST BELOW.

Please request an official transcript from each college or university attended.

College/University Name	City and State	Dates Attended	Degree earned	Date of Award
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### SELECT A PROGRAM OF STUDY (CHOOSE ONE)

#### \*Allied Health Program

- Allied Health Certificate
- Allied Health *Associate of Science*
- Human Services (Emphasis) *Associate of Arts*
- Medical Coding Specialist Certificate

#### Associated Construction Trades Program

- Carpentry, Level I Endorsement
- Construction Management Endorsement
- Electrical, Level I Endorsement
- Pipefitting, Level I Endorsement
- Pipeline Insulation, Level I Endorsement
- Plumbing, Level I Endorsement
- Scaffolding, Level I Endorsement
- Welding Materials Technology Endorsement
- Construction Technology I Certificate
- Construction Technology II Certificate
- Construction Technology *Associate of Applied Science*

#### Behavioral Health Program

- Behavioral Health Aid Certificate

#### Business - Accounting Program

- Accounting Technician I Certificate
- Accounting Technician II Certificate
- Accounting *Associate of Applied Science*

#### Business - Office Administration Program

- Office Administration I Certificate
- Office Administration II Certificate
- Office Administration *Associate of Applied Science*
- Office Administration (Medical Emphasis) *Associate of Applied Science*
- Medical Office Administration I Certificate
- Medical Office Administration II Certificate

#### AK Dental Therapy Education Program

- Dental Health Aide, Certificate
- Dental Health Therapy *Associate of Applied Science*

#### Business - Business & Management Program

- Business Specialist I Certificate
- Business Specialist II Certificate
- Business and Management *Associate of Applied Science*
- Entrepreneurship/Small Business Management I
- Entrepreneurship/Small Business Management II

#### Emergency Services Program

- Emergency Services Endorsement
- Emergency Services Certificate
- Municipal Fire Control Certificate

#### Heavy Truck and Equipment Operations Program

- Heavy Truck Operations Endorsement
- Heavy Equipment Operations Endorsement

#### Industrial Safety Program

- Industrial Safety Level I Endorsement

#### Information Technology Program

- Information Technology Support Specialist I Certificate
- Information Technology Support Specialist II Certificate

#### Iñupiaq Studies Program

- Iñupiaq Fine Arts Certificate
- Iñupiaq Language I Certificate
- Iñupiaq Language II Certificate
- Iñupiaq Studies *Associate of Arts*

#### Indigenous Education Program

- Indigenous Education Certificate
- Indigenous Education *Associate of Arts*

#### Liberal Arts Program

- Liberal Arts Certificate
- Liberal *Arts Associate of Arts*

All applicants must read and sign the following certification: I hereby certify that the information furnished in this application is true and complete to the best of my knowledge. I understand that false or misleading information provided herein may lead to my suspension or expulsion. I agree to abide by all the rules of Ilisagvik College upon enrollment.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_



Office of the Registrar  
P.O. Box 749  
Barrow, AK 99723  
Phone: 907.852.1757 or 1763  
Fax: 907.852.1784

## HIGH SCHOOL/GED TRANSCRIPT REQUEST

Student's Name: \_\_\_\_\_ SS# \_\_\_\_\_  
*(Last) (first) (Middle)*

Former Name(s): \_\_\_\_\_ Birthdate: \_\_\_\_\_

Phone # \_\_\_\_\_ Email Address: \_\_\_\_\_

### EDUCATIONAL INSTITUTION WHERE YOU EARNED YOUR HIGH SCHOOL DIPLOMA OR GED:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Date You Graduated: \_\_\_\_\_

Last Date You Attended High School: \_\_\_\_\_

Date GED Received: \_\_\_\_\_

Please send a certified official high school transcript or GED record to:

Office of the Registrar  
Ilisagvik College  
P.O. Box 749  
Barrow, AK 99723

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## SHAREHOLDER AUTHORIZATION TO RELEASE INFORMATION

Dear Student/Participant:

Ilisagvik College is an accredited institution and one of 37 tribal colleges nation-wide. As a federally recognized tribal college, the College receives some of its funding from the federal government and must provide proof that a certain percentage of the student body is American Indian, Alaska Native, Hawaiian or part of another First Nations People. Your information serves only to verify that Ilisagvik College meets that criterion.

Thank you.

*Birgit Meany*, Ed.D.

Dean of Academic Affairs

By completing the informational items below, I hereby authorize the corporation indicated below to provide Ilisagvik College with a verification of my enrollment as a shareholder.

<input type="checkbox"/> Ahtna, Incorporated	<input type="checkbox"/> Aleut Corporation
<input type="checkbox"/> Arctic Slope Regional Corporation	<input type="checkbox"/> Bering Straits Native Corporation
<input type="checkbox"/> Bristol Bay Native Corporation	<input type="checkbox"/> Calista Corporation
<input type="checkbox"/> Chugach Alaska Corporation	<input type="checkbox"/> CIRI
<input type="checkbox"/> Doyon, Limited	<input type="checkbox"/> Koniag, Inc.
<input type="checkbox"/> NANA Regional Corporation	<input type="checkbox"/> SEALASKA
<input type="checkbox"/> Other: _____	



First Name (Print)

Last Name (Print)

Social Security #

Date of Birth

Signature of Shareholder and/or Custodian of Record for Minor

Date

Phone Number

E-mail address



# **MENINGITIS**

## **Know Your Risk**

### **Learn About Vaccination**

#### **Important Notice:**

Information in this handout has been gathered from the Alaska Postsecondary Student Immunization Act (HB185), signed into law effective May 18, 2005. Additional information was gathered from the Alaska Department of Health and Social Services' Division of Public Health and the Web site of the American College Health Association at [http://www.acha.org/projects\\_programs/meningitis](http://www.acha.org/projects_programs/meningitis). The Alaska Commission on Postsecondary Education (ACPE) cannot provide medical information and is not responsible for any medical information provided to schools or to students. For questions specific to meningitis, immunization, and related diseases, please consult a qualified medical professional.

#### **Did you know?**

- **Meningococcal disease** is a contagious but largely preventable bacterial infection that most often leads to meningitis, an inflammation of the membranes surrounding the brain and spinal cord, or a condition called meningococcal septicemia, which is an infection of the blood.
- **Meningococcal disease is caused** by bacteria called *Neisseria meningitidis* that are spread person-to-person through the air (usually by sneezing or coughing), through direct contact with an infected person, such as oral contact with shared items like cigarettes or drinking glasses, or through intimate contact, such as kissing. This disease is not as contagious as things like the common cold or the flu, and it is not spread by casual contact or by simply breathing the air where a person with meningitis has been.
- **Meningococcal disease is a serious illness** that can lead to death within a few hours of onset; one out of ten cases is fatal, and in one out of seven survivors it can lead to severe and permanent disabilities, such as brain damage, hearing loss, seizures, or limb amputation.

#### **What are the symptoms of meningococcal disease?**

- High fever, headache, and stiff neck are common symptoms of meningitis in anyone over the age of 2 years. A rash may also develop over parts of the body, or the entire body. Other symptoms include nausea, vomiting, discomfort looking into bright lights, confusion, and sleepiness. These symptoms can develop over several hours, or they may take 1 to 2 days. As the disease progresses, seizures may develop. If you notice these symptoms – in yourself, friends, or others – you should contact your college health service or local hospital immediately.

#### **Who is at risk for meningococcal disease?**

- Anyone can get meningococcal meningitis, but scientific evidence suggests that college freshmen living in campus housing are at moderately increased risk to get this disease when compared to the general college population. The reasons for this increased risk are still not known for certain, but factors may include such things as crowded living situations, bar patronage, active or passive smoking, irregular sleep patterns, and sharing personal items.

- Other risk groups include infants and young children, household contacts to a person with meningococcal disease, refugees from parts of the world with high rates of meningococcal disease, laboratory workers who work with this bacteria, and military recruits.

**Are there vaccines against meningococcal disease?**

- Yes, there are two safe and effective vaccines that protect against four strains of the bacteria that cause meningococcal disease – serogroups A, C, Y, and W135. Immunization against meningococcal disease will decrease the risk of contracting the illness from these meningococcal strains.

**How can meningococcal disease be prevented?**

- **Many cases of meningococcal disease can be prevented.** The Centers for Disease Control and Prevention and the American College Health Association recommend that all first-year students living in residence halls be vaccinated against meningococcal disease. All other college students under the age of 25 years who wish to reduce their risk for the disease may choose to be vaccinated.
- **Vaccination is safe and effective.** It protects against four of the five most common strains (or types) of bacteria that cause meningitis. Approximately 70 to 80 percent of cases in the college age group are caused by strains that are potentially vaccine-preventable. The most commonly reported adverse reactions among adolescents and adults in clinical studies were pain at the injection site, headache, and fatigue. These respond to simple measures (ibuprofen or acetaminophen) and resolve spontaneously within a few days.

**For More Information**

To learn more about meningitis and immunization, visit the websites of the American College Health Association, [www.acha.org/meningitis](http://www.acha.org/meningitis), and the Centers for Disease Control and Prevention, [www.cdc.gov/ncidod/diseases/submenus/sub\\_meningitis.htm](http://www.cdc.gov/ncidod/diseases/submenus/sub_meningitis.htm).

\_\_\_ I have received a copy of this notice on meningococcal disease.

\_\_\_ I have received an immunization against meningococcal disease.

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Student Name

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Student Signature Date