the Chickasaw Nation

Chris Anoatubby
Governor

Department of Education / Education Resources Division
Student Development
300 Rosedale Road / Ada, OK 74820 / (580) 421-7711 / Fax: (580) 310-9531 / Email address: AdultLearning@Chickasaw.net

Adult Learning Program Adult Student Application

The purpose of this program is to provide educational services to students who did not complete the requirements to attain a high school diploma. The Chickasaw Nation Department of Education agrees to strictly maintain the confidentiality of all information disclosed hereunder, or any amendments thereto. Information contained within this application will be considered confidential and will not be disclosed to third parties without the written consent of the applicant or as otherwise required by law.

Applicant information:

Name: _____
First Middle Last Suffix

Mailing address: _____
Street City State ZIP

Physical address: _____
Street City State ZIP

Home phone no.: (____) _____ Cell phone no.: (____) _____ Birth date: _____

Communication preferences: ☐ Text ☐ Email ☐ Both Gender: ☐ Male ☐ Female

Email address: _____

Last public school attended: _____

Last grade completed: ☐ 7th ☐ 8th ☐ 9th ☐ 10th ☐ 11th Last date attended: _____

Have you attended other adult education programs? ☐ Yes ☐ No
If yes, what is the last date attended: _____

Do you have any special needs that may require additional program support modifications? ☐ Yes ☐ No
If yes, please explain: _____

_____

_____

Program eligibility:
Indicate eligibility category for which the applicant is seeking approval for program participation. All applicants must submit a copy of a photo identification (ID).
Tribal affiliation: ☐ Chickasaw ☐ Chickasaw dependent ☐ Cherokee ☐ Choctaw ☐ Muscogee (Creek)
☐ Seminole ☐ Other First American (please indicate tribal affiliation): _____

☐ Referred for services - if yes, please indicate source of referral: _____

Certification:
I certify that the information provided on this form is true and correct.

_____ _____
Applicant signature Date

Return application to:
The Chickasaw Nation
Attn: Adult Learning Program
300 Rosedale Road
Ada, OK 74820
Fax: (580) 310-9531
Email address: AdultLearning@Chickasaw.net