

STUDENT ENRICHMENT APPLICATION

Nageezi Chapter House
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FOR OFFICE USE ONLY:

DATE APPLICATION RECEIVED:

TIME APPLICATION RECEIVED:

RECEIVED BY:

PERSONAL AND FAMILY DATA

SS#:	Census #:	Legal Name: (Last, First, Middle Initial)
Current Mailing Address: (City, State, Zip)		Cell Phone #:
Physical Address:		Home Phone #:
Date of Birth:	Gender:	Message #:

If under the age of 18, Verification of Parent's Nageezi Navajo Nation Voter's Registration.

Mother's Name:	Address: (City, State, Zip)	Registered Voter: Y or N
Father's Name:	Address: (City, State, Zip)	Registered Voter: Y or N

EDUCATION

School Attending:
Address:
Grade:
Purpose of Travel:

I CERTIFY THAT THE INFORMATION PROVIDED IS CORRECT TO THE BEST OF MY KNOWLEDGE:

STUDENT SIGNATURE:	DATE:
PARENT/LEGAL GUARDIAN SIGNATURE:	DATE:

ATTACHMENT:

1. Letter of Acceptance
2. Itinerary.

REQUIREMENT

1. Attend the Regular Chapter Meeting.