



# Elder Student Checklist

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1. Fill out online Application entirely: [Click Here](#)
2. Fill out the Elder Tuition Wavier submit to Business Office
3. Submit to Admissions all OFFICIAL documents, these include:
  - Copy of Valid Driver's License
  - If enrolled in a tribe submit a Certificate of Indian Blood/Descendancy Certificate(non-enrolled)
  - If non-native no additional documentation is needed
4. You should receive your acceptance letter in the mail with the address you provided in your application!
5. Meet with an Academic Advisor to enroll in classes!
  - Sign up for orientation
  - Become a Laker!

Elders are classified as non-degree seeking students over the age of 55, and are eligible for ONE tuition free class per semester. If the student wishes to become a degree seeking student at any time, they must go through the Admissions process that best fits their academic journey and submit all required documentation. Elders must submit a new Tuition Wavier form each semester they enroll in classes.

If you have any questions please contact Admissions by email, telephone, or by simply stopping by Student Services! Check your tuition waiver by contacting the Business Office. After you receive your acceptance letter meet with an Academic Advisor in Student Services!

Admissions – 218-335-4286  
Business Office – 218-335-4203  
Student Services – 218-335-4220  
Student Services FAX – 218-335-4217  
LLTC's Main Office – 218-335-4200

6945 Little Wolf RD NW, Cass Lake, MN 56633

[admissions@lltc.edu](mailto:admissions@lltc.edu)

[www.lltc.edu](http://www.lltc.edu)



# Tribal Enrollment Verification Request

Please return this form to the Admissions Office located in the Office of Student Services

Student Information	Insert information in boxes below
Students full name	
Contact Phone number	
Social Security Number	
Date of Birth	
Name of Tribe where student is enrolled	
Mother's name	
Mother's tribe where enrolled	
Father's name	
Father's tribe where enrolled	

X

\_\_\_\_\_  
Student's Signature

The student listed above has applied for admission to Leech Lake Tribal College. This is a request to verify tribal enrollment.

- If the student is an enrolled member of your tribe please send supporting documentation.
- If the student is a descendant of your tribe please send supporting documentation.
- If the student is not enrolled, or does not have supporting documents to claim Descendancy, please call and let us know so that we can work with the student.

Please send Tribal Certificate if Indian Blood or supporting documentation to:

Leech Lake Tribal College Attn: Admissions

6945 Little Wolf Rd NW

Cass Lake, MN 56633

Fax: 218-335-4217

Email: [admissions@lltc.edu](mailto:admissions@lltc.edu)

For questions, please call: 218-335-4286



LEECH LAKE TRIBAL COLLEGE  
 6945 Littlewolf Road NW  
 Cass Lake, MN 56633  
 Phone (218) 335-4200  
 Fax (218) 335-4217

### Tuition Waiver Request Form

The waiver of tuition applies to basic tuition costs only and does not cover the payment of additional fees such as registration and laboratory fees. Those who receive a tuition waiver must meet Leech Lake Tribal College's Satisfactory Academic Progress:

1. 2.0 Cumulative Grade Point Average
2. 67% completion of all credits attempted

The Tuition Waiver request Form must be completed every semester. The Business Office must receive the completed application by following deadlines:

- August 15<sup>th</sup> for Fall Semester
- December 15<sup>th</sup> for Spring Semester

### STUDENT INFORMATION

Last Name:	First Name:	SSN:	Student ID:
Mailing Address:	City and State:	Zip:	
Contact Phone:	Email:	Date of Birth:	

Semester/Year:  FA \_\_\_\_  SP \_\_\_\_  SU \_\_\_\_

Eligibility Category	Credits Per Semester	Select Your Eligibility
Elders: 55+ years of age	3	<input type="checkbox"/>
Employees	3	<input type="checkbox"/>
Children of Employees	Up to 12	<input type="checkbox"/>
Grandchildren of Employees	Up to 12	<input type="checkbox"/>

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

### FOR OFFICE USE ONLY:

Approved  Denied  Date Received: \_\_\_\_\_

Director of Finance Signature: \_\_\_\_\_ Date: \_\_\_\_\_