

REQUEST FOR TRIBAL ENROLLMENT VERIFICATION FORM

Please complete this form fully and return it to the Admissions Coordinator, housed within the Student Service department. A copy can be emailed to admissions@lltc.edu.

Student's Full Name	
Maiden/Other Name (If None, Write N/A)	
Last 4 of Student's Social Security #	
Phone Number	
Date of Birth	
Tribe Student is Enrolled With	
Student's Mother's Full Name	
Tribe Mother is Enrolled With	
Student's Father's Full Name	
Tribe Father is Enrolled With	

X Student's Signature

Date

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, not enrolled, or does not have supporting documents to claim Descendancy, please email admissions@lltc.edu and notify us.

If there are any questions, please call the Admissions Coordinator at (218) 335-4218.

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

Leech Lake Tribal College, Attn: Admissions
6945 Little Wolf Rd NW
Cass Lake, MN 56633