



Education and Career Services

Stockbridge-Munsee Community

P. O. Box 70

W12635 County Road A

Bowler Wisconsin 54416

Phone: 715-793-4100/793-4353 Fax: 715-253-2436



Education and Career Services Application

APPLICANT INFORMATION

First Name	MI	Last Name	Maiden Name	Date of Birth
Street Address		City	State	Zip Code
Contact Phone	Alternate Contact Phone		Email:	
Check services applying for today:				
Education: ___ Post-Secondary Training (anything past high school), in accordance with academic development plan and if marked have you applied for Financial Aid? Yes <input type="checkbox"/> No <input type="checkbox"/> College/University Attending: _____				
Employment: ___ Work Experience ___ Youth Employment ___ Summer Youth				
Support Services: ___ Uniform ___ Tools ___ Skills Training Other: _____				

PERSONAL DATA: check and complete all that apply

Tribal Affiliation (If Applicable) Tribal Affiliation: _____ Enrollment #: _____ OR Parent Tribal Affiliation & Enrollment #: _____ Are you a US Citizen? Yes ___ No ___ Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>	Marital Dependents Status: ___ Single-No Children ___ Single with Dependent Children ___ Married-No Children ___ Married with Dependent Children ___ Caring for Elders in Home	Are you a U.S. Veteran? Yes ___ No ___ Are you a spouse of a Veteran? Yes ___ No ___ *If no and male, have you registered with selective service? Yes ___ No ___ *If yes, write your Registration # _____
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Employment Status:
 Unemployed Self-Employed Employed (circle one): Full- Time Part-Time Seasonal Other: _____

Education Status: What is the highest degree or level of school you have completed? (If currently enrolled, highest degree received)
 Some High School, No Diploma High School Graduate, Diploma or Equivalent (GED, HSED) Some College Credit, No Degree
 Trade/ Technical/ Vocational Training Associate Degree Bachelor's Degree Master's Degree PhD

CERTIFICATION

I hereby apply for educational or employment services from the Stockbridge-Munsee Community. I certify that the language in this application is true and correct. I authorize the Education and Career Services Department to process my application and verify the information contained in it. I further release other parties, including schools and governmental programs, to provide requested information to the Stockbridge-Munsee Education and Career Services Department so it may process my application. I understand that the falsification or material omission of information on this application shall be grounds for the denial of services and may result in legal action against me. I agree to abide by the program requirements outlined in the Stockbridge-Munsee Education and Career Services Program's Handbook in relation to services provided based on this application and understand that I may have appeal rights under the Stockbridge-Munsee Education and Career Services Program's Handbook

Applicant's Signature	Date	Parent/Guardian Signature (If Applicable)	Date
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