

SOUTHEAST TECH APPLICATION FOR ADMISSION

BIOGRAPHICAL INFORMATION

Name _____
Last First Middle Social Security Number Birth, Maiden, or Other Last Name

Current Address _____
Street City ST Zip Code County

Phone _____ Email _____
Cell Home

Would you like to receive text messages regarding enrollment status and other important reminders at your cell number?

Yes No

Permanent Address _____
(If Different Than Above) Street City ST Zip Code County

Emergency Contact _____ Emergency Contact Phone _____

PROGRAM INFORMATION

Which program do you wish to enter? (Required) _____ Diploma AAS Degree

FULL TIME - 12 credits or more per semester

PART TIME - 11 credits or less per semester

When do you wish to enter school? Fall (August) Spring (January) Summer (June) Year _____

Have you previously applied or been enrolled at Southeast Tech? No Yes If Yes, Student ID# _____

How did you hear about Southeast Tech? _____

PRIOR EDUCATION

Name of High School Attended _____ City _____ ST _____

High School Graduation Date _____ Do you have a GED? Yes No

College, University, or Tech School Attended _____ City _____ ST _____

College, University, or Tech School Attended _____ City _____ ST _____

College, University, or Tech School Attended _____ City _____ ST _____

I certify that the information on this application is true and complete to the best of my knowledge.

Applicant's Signature _____ Date _____

REQUIRED IMMUNIZATION RECORDS

Due to regulations mandated by the South Dakota Health Department, all accepted students must provide documentation of receiving the required two doses of immunization against Measles, Mumps, and Rubella.

OPTIONAL INFORMATION

Marital Status Single Married

Gender Male Female

Date of Birth _____

Are you Hispanic/Latino? Yes No

What is your racial background?
Check all that apply.

American Indian/Alaska Native

Asian

Black/African American

Native Hawaiian/Pacific Islander

Caucasian

Are you a U.S. Citizen? Yes No

If No, please list the country of your citizenship:

If mailing your application, please send to:

Southeast Technical Institute

Attn: Admissions

2320 N Career Ave

Sioux Falls, SD 57107

Email: Admissions@southeasttech.edu