**What is AIHEC?**

The American Indian Higher Education Consortium (AIHEC) is a support network of 37 Tribal Colleges and Universities (TCUs) in the United States and in Canada. One of the main purposes of AIHEC is to influence federal policies on American Indian higher education. *In addition, AIHEC provides an annual student conference where students of tribal colleges and universities get a chance to participate in academic competitions.*

**2024 AIHEC Spring Student Conference**

* Rapid City, SD.
* March 8-12, 2025 (excluding travel days)

**For Office Use Only:**

Date Received: Received by:

**Eligibility Requirements**

Before you start on the student application you’ll want to be sure that you are eligible. AIHEC eligibility requirements are as follows:

* Be enrolled in 6 credits or more at Diné College (Spring 2025)
* Must have completed 12 college credits or more at Diné College
* Must have 2.0 cumulative GPA or higher
* Cannot be on Academic or Residence Life Probation
* Must not be in violation of college’s Student Code of Conduct.
* Must be committed to meet with project groups on frequent basis prior to AIHEC Conference
* Must comply with AIHEC Rules & Expectations and Diné College’s Student Code of Conduct included below in this document.
* Must have a valid state ID, for travel reasons.

**A complete application consists of the following:**

* Student Application
* Competition Category(ies)
* References/Brief Responses
* Instructor Recommendation Form
* Unofficial Transcript (obtain from Warrior Web)
* Spring 2025 Class Schedule (obtain from Warrior Web)
* Waiver of Liability
* Media Release Form
* Rules, Expectations and Student Code of Conduct

The application deadline for 2025 AIHEC Spring Student Conference is **4:00 PM on Friday, November 29, 2024 or email to Kimberly at** **kdominguez@dinecollege.edu** **or Miranda at** **majames@dinecollege.edu****.** Please submit complete application to the Office of the Provost, 3rd floor NHC Tsaile.

For questions, please contact:

Kimberly Dominguez, Co-Chair, Academic kdominguez@dinecollege.edu or call (928) 724-6693.

Miranda James, Co-Chair, Academic at majames@dinecollege.edu or call (928) 724-6974.

**Student Participant Application**

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| **GENERAL INFORMATION** |
| Full Name (first, middle, last):***(as printed on your State Driver’s License or ID for travel purposes)*** | Student ID No. | T-shirt Size | Jacket Size |
|  |  |  |  |
| Address: | City, State, Zip Code: |
|  |  |
| Webmail address (*@dinecollege.edu*): | Home/Cell Phone Number: |
|  |  |
| How did you hear about 2025 AIHEC Spring Student Conference? | Birthdate (month/day/year): | Age |
| * KXWR FM 92.1  Flyer  Email  Friend  Other
 |  |  |
| Program of Study: | Cumulative GPA: | Advisor’s Name: |
|  |  |  |
| **Emergency Contact Name/ Phone Number/ Relation to you:** |
| Campus Site: | * Chinle  Crownpoint Shiprock  Tsaile  Tuba City  Window Rock
 |
| Have you previously participated in the AIHEC Conference?* Yes  No If yes, when? Competition Category?
 |
| Do you have any disabilities or medical conditions that need to be disclosed to the DC AIHEC organizers?  |
| Have you ever flown before?Are you physical able to fly (motion sickness, sinus issues, etc.)? Are there any situations or legal issues we need to know about passing through TSA checkpoints? |

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| **EXTRA-CURRICULAR ACTIVITIES** (If this does not apply, please put N/A in each box) |
| Are you a member of an organization/club? If yes, please write the name of the organization/club. |
| Are you a member of a Diné College sports team? If yes, please list sport(s). |
| Do you plan to be working in Spring 2025? If yes, please explain. |

Student Name ID No. Cell No.

Which AIHEC competition category(ies) are you interested in? Check or highlight from the list.

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| **COMPETITION CATEGORIES & GENERAL REQUIREMENTS** |
| Primary | Secondary | Optional |
| ***Academic focused competition*** | ***Elective competition requires a selection of an Academic competition.*** | ***If your Primary and Secondary competition schedules do not interfere with these categories, you are welcome to participate in the following optional selections.*** |
| ***Only one competition to select as Primary:*** | * **Poetry Slam**
* **Hand Games**
* **Archery**
* **Art Exhibit\*\***

*\*\*For the Art Exhibit category, participants do NOT need to attend the student conference. However, if you want to attend you will be asked to compete in another (academic) category.* | * **Ches**
* **Mr. and Ms. AIHEC**
* **AIHEC Student Senate**
* **Volleyball**
* **TCJ Student Writing, Art, and Film Contest**
 |
| * **Knowledge Bowl**
* **Critical Inquiry**
 |
| ***Optional to select a secondary:*** |
| * **Business Bowl**
* **Science Bowl**
* **Web Page Design**
* **Scientific Oral**
* **Speech**
* **Math Bowl**
* **Scientific Poster Presentation**
* **Traditional Plant and Herbs**
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| **INSTRUCTOR RECOMMENDATION FORM** |
| Please have an instructor who you have taken a class with complete this recommendation form. The instructor should be able to write about your participation in the classroom and give reasons why you should be selected as a participant for the AIHEC Spring Student Conference. **2025 AIHEC COACHES AND COMMITTEE MEMBERS CANNOT COMPLETE RECOMMENDATION FORM.** |
| Please submit in an enclosed envelope to Office of Institutional Planning & Reporting Office **by 4:00pm on November 29, 2024. Send to** **kdominguez@dinecollege.edu** **or** **majames@dinecollege.edu** |
| **Student Name:** |  |  |
| **Class/Subject:** |  |  |

|  |  |
| --- | --- |
| 1) | How has this student shown leadership potential and/or skills within your classroom? |
|  |  |
|  |  |
| 2) | Based on your observations, would you say this student is capable of handling their academic coursework and extracurricular activities? Please explain. |
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|  |  |

**Instructor Signature Date**

THIS IS A LEGAL DOCUMENT, PLEASE READ AND UNDERSTAND THIS DOCUMENT BEFORE SIGNING.

# ASSUMPTION OF RISK, WAIVER OF LIABILITY AND INDEMNIFICATION AGREEMENT

This Agreement must be completed in order to participate in the activities associated with the Program, course, or activity (PCA).

Participant (print full name) Student ID No. Cell Number ( ) Email address @dinecollege.edu

Activity

 2025 Spring Student Conference

Date/ Location March 8-12, 2025 (including travel) / Rapid City,SD.

I, the Participant named above, am familiar with the curriculum and/or the activities which take place in the Program, Course or Activity (PCA).

**TERMS AND CONDITIONS**

I will participate in the above PCA with Diné College. I understand that such participation can include foreseeable and unforeseeable risks and other hazardous activities inherent in the PCA which may expose the participant to illness, injury, or death. Participant will voluntarily compete in the PCA with knowledge of the danger involved and hereby agrees to assume and accept any and all risks of illness, injury or death.

**WAIVER, RELEASE AND INDEMNIFICATION**

Participant understands and acknowledges that Diné College is not an insurer of Participant’s behavior, actions or participation in the PCA. The College assumes no liability for personal injuries or property damages to Participant’s property or to third persons arising out of participation in the PCA. Participant hereby agrees to release, waive, covenant not to sue, indemnify and hold harmless the College, and all of their employees from any and all liability, claims, demands, actions and causes of action whatsoever arising out of or related to any loss, damage to any property belonging to Participant arising out of or related to participation in the above named PCA, and excepting only such loss, damage or injury as may be caused by the sole negligence of any Diné College employees.

**PARTICIPANT HAS CAREFULLY READ THESE TERMS AND FULLY UNDERSTANDS THE CONTENT AND IS AWARE THAT THIS IS A RELEASE OF LIABILITY AND SIGNS IT OF HIS OR HER OWN FREE WILL.**

I am signing the Agreement for myself as a Participant. I acknowledge that I am eighteen (18) years of age and that I understand the terms of this Agreement. I also acknowledge that this Agreement shall bind my heirs and personal representatives.

 Participant Print Name Signature of Participant Date

THIS IS A LEGAL DOCUMENT: PLEASE READ AND UNDERSTAND THIS DOCUMENT BEFORE SIGNING.

# Participant Health Insurance Information

*\*If you do not have your own health insurance, you may input your IHS Chart number.*

Health Insurance Provider

Health Insurance ID No.

Health Insurance Address

Health Insurance Phone#

Primary Named Insured

# Media Release Form

For valuable consideration, I hereby irrevocably consent to and authorize Diné College the use and reproduction of any and all photographs taken of me at a time period of a campus event, travel, workshop, conference, or public gathering for the purpose of academic publication, institutional reporting, or visual data collecting, without further compensation to me.

All negatives, positives or digital capture files, together with the prints and video(s) shall constitute the property of Diné College, solely and completely.

Name of Student (Print Name)

Address Phone

City State Zip

**RULES, EXPECTATIONS, AND STUDENT CODE OF CONDUCT**

If accepted to participate in the 2024 AIHEC Spring Student Conference, I will comply with the following (please initial next to each statement):

|  |  |
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| **Initials** | **General Rules, Expectations & Student Code of Conduct** |
|  | I will be committed and present at all AIHEC meetings, practices, and/or preparation sessions prior to the AIHEC Spring Student Conference. |
|  | I will continue to maintain a 2.0 cumulative GPA and/or higher in spring 2025 semester. |
|  | I will make sure to collaborate and attend meetings established by my academic coach for the competition(s) in which I will participate. |
|  | I will demonstrate good/positive behavior to my peers, coaches and AIHEC staff throughout the AIHEC experience, especially at the Spring Student Conference. |
|  | I will be a positive role model and representative for Diné College at the AIHEC Spring Student Conference. |
|  | I will refrain from the purchase, distribution, or consumption of alcoholic beverages and/or illicit drugs (regardless of age). |
|  | I will show up on time for scheduled meetings and competitions. |
|  | I will encourage and support my peers by attending other competitions, if my schedule permits, at AIHEC conference. |
|  | I am aware if I will be missing classes; therefore, I understand that it is my responsibility to plan ahead, request for assignments in advance, and collaborate with my Instructors so that I do not fall behind in my coursework. |
|  | I understand that if I violate the Student Code of Conduct prior to and during the 2025 AIHEC Spring Student Conference, I will have to pay back the college for any expenses accrued (travel, registration fees,etc.). |

**By signing below I agree that all information provided is correct to the best of my knowledge. I will abide by the Diné College Student Code of Conduct, including Sexual Harassment/ Non-Discrimination Policy, and other relevant college policies in a professional manner. If I fail to uphold the aforementioned guidelines, policies, and/or procedures, I may face disciplinary actions and/or be sent home immediately from the event or excursion at my own expense.**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Student Print Name |  | Student Signature |  | Date |  | Cell Number |