College or University:	OMB Control No. 1076-0018 Expiration Date XX/XX/XX
Date of Count:	

#	Student ID Number: (Students identified in count)	Enrollment Application: Y/N	HS/GED Diploma Submitted: Y/N:	CFIB Submitted: Y/N:	Total Credit Hours:	Remarks:
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OMB Control No. 1076-0018 Expiration Date XX/XX/XX

Paperwork Reduction Act Statement: We are collecting this information subject to the Paperwork Reduction Act (44 U.S.C. 3501) for grants to Tribally Controlled Colleges or Universities for the purpose of ensuring continued and expanded educational opportunities for Indian students. Your response is voluntary and we will not share the results publicly. We may not conduct or sponsor and you are not required to respond to a collection of information unless it displays a currently valid OMB Control Number. OMB has reviewed and approved this survey and assigned OMB Control Number 1076-0018, which expires XX/XX/XXXXX.

Estimated Burden Statement: We estimate the form will take you 60 minutes to complete, including time to read instructions, gather information, and complete and submit the form. You may submit comments on any aspect of this information collection to the Information Collection Clearance Officer, Office of Regulatory Affairs & Collaborative Action, Indian Affairs, U.S. Department of the Interior, 1001 Indian School Road NW, Suite 229, Albuquerque, New Mexico 87104.