# PLEASE COMPLETE FORM USING INK. BE SPECIFIC AND FILL IN ALL APPROPRIATE BLANKS. ALL INFORMATION GIVEN WILL BE HELD STRICTLY CONFIDENTIAL AND WILL ONLY BE USED IN ACCORDANCE WITH APPLICABLE REGULATIONS.

**$25 non-refundable application fee (must be paid at time of application**) **Financial Aid is available to those who qualify!**

□ **New Student** □ **Returning Student**  □ **Full-Time** □ **Part-Time**

# Application for Admission

## Applicant Information

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Full Name: |  |  |  | Date: |  |
|  | Last | First | M.I. |  |  |

|  |  |  |
| --- | --- | --- |
| Address: |  |  |
|  | Street Address | Apartment/Unit # |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
|  | City | State | ZIP Code |

|  |  |  |  |
| --- | --- | --- | --- |
| Phone: |  | Email |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Social Security No.: |  |  |  | Date of Birth: |  |

## Demographics (used for statistical purposes and not used to determine admission)

Gender: □ Male □ Female

Ethnicity: □ Black (Non-Hispanic) □ American Indian/Alaskan Native

 □ White (Non-Hispanic) □ Asian or Pacific Islander □ Hispanic

## Educational Background

|  |  |  |  |
| --- | --- | --- | --- |
| High School: |  | Address: |  |
| From: |  | To: |  | Did you graduate? | YES[ ]  | NO[ ]  | Diploma: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| College: |  | Address: |  |
| From: |  | To: |  | Did you graduate? | YES[ ]  | NO[ ]  | Degree: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| GED/Other: |  | Address: |  |
| From: |  | To: |  | Did you graduate? | YES[ ]  | NO[ ]  | Degree: |  |

## Disclaimer and Signature

ALL APPLICANTS ARE REVIEWED WITHOUT REGARD TO RACE, RELIGION, COLOR, SEX, AGE, NATIONAL ORIGIN, DISABILITY, OR VETERAN STATUS. I hereby understand that any misrepresentation of information may result in denial of admission or dismissal.

|  |  |  |  |
| --- | --- | --- | --- |
| Signature: |  | Date: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Signature of Parent/Guardian:(If student is under 18) |  | Date: |  |