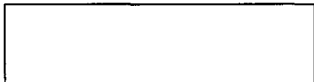


Application For Admission



OFFICE USE ONLY

(USE BALL POINT PEN ONLY. PLEASE COMPLETE BOTH SIDES OF THIS FORM.)

1. I am applying for the: Year 20 ____
 Spring Semester Summer Session Fall Semester

2. Social Security Number: _____ - _____ - _____
(If Available)

3. Name: _____
Last Name First Name Middle Initial

4. Previous Last Name (if you attended under another name):

5. Date of Birth: _____ - _____ - _____
Month Day Year

6. State Birthplace:
 California _____

7. Sex: Male Female

8. Address: _____
(Number and Street)

9. City/State: _____

10. Zip Code: _____

11. E-mail Address: _____ @ _____

12A. Day Phone (include area code): _____ - _____ - _____

12B. Evening Phone (include area code): _____ - _____ - _____

12C. Cell Phone (include area code): _____ - _____ - _____

13. Last High School Attended: (code#) _____

Name: _____

City: _____ State: _____

14. High School Graduation or Date Last Attended: _____ - _____
Month Year

15. Proposed Major: _____ (code#) _____

16. Last College Attended: (code#) _____

Name: _____

City: _____ State: _____

Degree Earned: AA/AS Bachelor or Higher

17. California Driver's License Number: _____

18. Ethnic Survey:

- | | | | |
|----|--|----|---|
| A | <input type="checkbox"/> Asian | HR | <input type="checkbox"/> Central American |
| AC | <input type="checkbox"/> Chinese | HS | <input type="checkbox"/> South American |
| AI | <input type="checkbox"/> Asian Indian | HX | <input type="checkbox"/> Other Hispanic |
| AJ | <input type="checkbox"/> Japanese | N | <input type="checkbox"/> American Indian,
Alaskan Native |
| AK | <input type="checkbox"/> Korean | O | <input type="checkbox"/> Other Non-White |
| AL | <input type="checkbox"/> Laotian | P | <input type="checkbox"/> Pacific Islander |
| AM | <input type="checkbox"/> Cambodian | PG | <input type="checkbox"/> Guamanian |
| AV | <input type="checkbox"/> Vietnamese | PH | <input type="checkbox"/> Hawaiian |
| AX | <input type="checkbox"/> Other Asian | PS | <input type="checkbox"/> Samoan |
| B | <input type="checkbox"/> Black, Non-Hispanic | W | <input type="checkbox"/> White |
| F | <input type="checkbox"/> Filipino | X | <input type="checkbox"/> Unknown |
| H | <input type="checkbox"/> Hispanic | XD | <input type="checkbox"/> Decline to state |
| HM | <input type="checkbox"/> Mexican, Mex.-Amer.,
Chicano | | |

19. Primary Language

- E English
- N Not English

20. Citizenship Status:

- 1 U.S. Citizen
- 2 **NOT a U.S. Citizen**
- 3 Permanent Resident (Immigrant) Visa
- 4 Temporary Resident/Amnesty
- 5 Refugee/Asylee
- 6 Student Visa (F-1 or M-1)
- X Other Visa or Visa type
- Unknown

21. Student Academic Level. (Please indicate your education status at the beginning of the semester for which you are applying. Mark the highest level of education attained.)

- 0 **NOT a High School graduate:**
- 1 Not a graduate of, and no longer enrolled in high school
- 2 Special admit student currently enrolled in high school
- 3 Currently enrolled in Adult School
- 4 **High School graduate without a college degree:**
- 5 Received High School diploma
- 6 Received a Certificate of California High School Proficiency Exam
- 7 Passed the GED, or received a High School Certificate of Equivalency/Completion
- 8 Foreign Secondary School Diploma/Certificate of Graduation

College Degree:

- 7 Received an Associate Degree
- 8 Received a Bachelor Degree or higher
- X **Unknown:**
- Unknown

Date of the highest level of education attained:
_____ - _____
Month Year

22. Student Enrollment Status: (Mark one)

- 1 **First-time student.** A student enrolled in any college for the first time
- 2 **First-time transfer student.** A student enrolled at this college for the first time and who has transferred from another college after earning credit.
- 3 **Returning transfer student.** A student who has previously attended this college, transferred to another college, and has now returned to this college.
- 4 **Returning student.** A student enrolled at this college after an absence of one or more regular sessions without interim attendance at another college.
- Y **Special admissions student.** A student who is currently enrolled in K-10 or a senior high school student currently enrolled in 11-12.

23. Student Educational Goal: (Select your highest priority)

- A Obtain a bachelor's degree after completing an associate's degree
- B Obtain a bachelor's degree without completing an associate's degree
- C Obtain a two year associate's degree without transfer
- D Obtain a two year vocational degree without transfer
- E Earn a vocational certificate without transfer
- F Discover/formulate career interests, plans, goals
- G Prepare for new career (acquire job skills)
- H Advance in current job/career (update job skills)
- I Maintain certificate or license (e.g. Nursing, Real Estate)
- J Educational development (intellectual, cultural)
- K Improve basic skills in English, reading or math
- L Complete credits for high school diploma or GED
- M Undecided on goal

Statement of Legal Residence

All students classified incorrectly as residents are subject to reclassification and payment of all nonresident fees

ALL APPLICANTS MUST COMPLETE THIS SECTION

SOCIAL SECURITY NUMBER _____ TODAY'S DATE _____

NAME (Print full legal name. DO NOT use nicknames, initials, or abbreviations)

Last _____ First _____ Middle _____

Age _____ Birthdate _____ Birthplace _____

RESIDENCE ADDRESS (Legal / permanent address. DO NOT use P.O. Box Number)

Number / Street _____ City _____ State _____ Zip _____

I have lived at this address since _____ (If less than 2 years, show previous address below)

Number / Street _____ City _____ State _____ Zip _____

Number / Street _____ City _____ State _____ Zip _____

When did your present stay in California begin? _____
MONTH DAY YEAR

NOTICE TO STUDENTS: If additional information is needed to determine your residence status, you will be required to complete a supplemental residence questionnaire and/or to present evidence in accordance with Education Code Sections 68040 et seq. The burden of proof to clearly demonstrate both physical presence in California and intent to establish California Residence lies with the student. Failure to present such proof will result in a classification of non-resident.

- Yes No**
- Are you a United States Citizen?
- If you are not a United States citizen, have you been admitted to the U.S. as a resident alien?
If yes, give date admitted _____ and Alien Registration Number _____
If no, list visa type (example: B-2, Visitor visa - dependent), duration of status, and country of citizenship:
Visa type _____ Duration of Status _____ Country of Citizenship _____

★ Verification of visa status is required. Students must present proof of status ★

- Did you file California State Income Tax last year?
If not in California, in what state did you last file state taxes? _____ For what year(s) _____
- Have you or (if under 19 and unmarried) your parents:
- Registered to vote in a state other than California? If yes, where & when _____
- Petitioned for divorce in a state other than California? If yes, where & when _____
- Attended an out-of-state institution as a resident of that other state? If yes, where & when _____
- Declared nonresidence for California State Income Tax purposes? If yes, where & when _____
- Are you on active military duty?
If yes, what date did your tour begin in California? (month/day/year) _____
State of legal residence on military records: _____
- Are you a dependent of an active duty military person?
If yes, when did your sponsor's tour begin in California? (month/day/year) _____
- Have you been discharged from active military duty within the last year?
If yes, submit copy of DD-214

Name of Father (if living) _____	Name of Mother (if living) _____
Name of Legal Guardian _____	
Legal Address (number & street, city, state, zip)	Dates (month / year)
Father _____	From _____ To _____
Mother _____	From _____ To _____
Guardian _____	From _____ To _____
If less than 2 years, give previous address(es) for past 2 years.	
Relationship _____ St. & No. _____	City _____ State _____ Zip _____ Fr. _____ To _____
Relationship _____ St. & No. _____	City _____ State _____ Zip _____ Fr. _____ To _____

I certify under penalty of perjury that the information on this application is correct and I understand that falsification or failure to report change in residence may result in my dismissal.

Student Signature _____ Date: _____

