

For Office use only:  
DATE STAMP



Banner ID @: _____
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Application fee Rec: Check# _____
Application fee Waived: _____

## APPLICATION FOR ADMISSION

**Applicant's Legal Name** \_\_\_\_\_  
(Last) \_\_\_\_\_ (First) \_\_\_\_\_ (Middle) \_\_\_\_\_

**Former Last Name(s)** \_\_\_\_\_ - - - / / \_\_\_\_\_  
(Social Security Number) \_\_\_\_\_ (Date of Birth) \_\_\_\_\_ (Gender: M/F) \_\_\_\_\_

(Social Security Number is requested for purposes of financial aid, Federal income tax benefits, the provision of some College services, accuracy of student records and other business purposes.)

**Mailing Address** \_\_\_\_\_  
No. Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Permanent Address** \_\_\_\_\_  
No. Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Telephone** \_\_\_\_\_  
Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

**E-mail** \_\_\_\_\_  
(Used for correspondence from the College)

**Have you ever attended this college?**  Yes  No If yes, when? \_\_\_\_\_

**Have you previously attended a CT Community College?**  Yes  No If yes where? \_\_\_\_\_

**For which semester are you applying?** Fall (Sept-Dec) Spring (Jan-May) Winter (Dec-Jan) Summer (Jun-Jul) Year \_\_\_\_\_

### CITIZENSHIP

Are you a United States citizen?  Yes  No If not, are you a Permanent Resident? (Green Card holder)  Yes  No

### ETHNICITY/ RACE

Please provide the following ethnicity and race data. This information is requested on a Voluntary basis by the U.S. Department of Education, National Center for Education Statistics. Your answer will not affect admission to or registration in the college.

Do you consider yourself to be Hispanic/Latino?  Yes  No

What is your race? Select one or more:

White(10)  Black or African American(20)  Asian(45)  American Indian or Alaskan Native(50)  
 Native Hawaiian or Other Pacific Islander(80)  Other(90)

### FAMILY EDUCATIONAL BACKGROUND

Do either of your parents hold a Bachelor's Degree (4-year College Degree) or Higher?  Yes  No

### MILITARY STATUS

Are you currently on active duty with the U.S. armed forces?  Yes  No (ACTD)

Are you currently a member of the National Guard or Reserve?  Yes  No (NGRE)

Have you ever served in the U.S. armed forces?  Yes  No (VET1)

Are you a dependent of a member of the U.S. armed forces?  Yes  No (VETD)

If you answered "Yes" to any of these questions you may be entitled to benefits and you should meet with the College's Veterans Certifying Official (VCO).

### IN-STATE TUITION

1. I am eligible for in-state tuition because I have continuously resided in Connecticut for at least one year and Connecticut is my permanent home. \_\_\_\_\_ Yes \_\_\_\_\_ No

2. Even though I answered "No" to the question above, I claim and can demonstrate through documentation that I am eligible for in-state tuition. \_\_\_\_\_ Yes \_\_\_\_\_ No

*Out-of-state students may be eligible for a reduced tuition rate through the NEBHE program. For details, see the college catalog or website.*

3. \_\_\_\_\_ Check here if applying under the New England Regional Student program (NEBHE).

*If you answered "Yes" to question #2 or checked question #3, you must submit a "Declaration of Eligibility for In-State or NEBHE Tuition" for review and determination of eligibility.*

## DEGREE STATUS/ PROGRAM CHOICE

In which Degree/Certificate program are you planning to enroll? \_\_\_\_\_

Use list of majors/codes on back of application.

Please write major name and code here.

### HIGHEST DEGREE LEVEL (check one only)

<input type="checkbox"/> No High School Diploma or GED(01)	<input type="checkbox"/> High School Diploma or GED(02)	<input type="checkbox"/> Some College (06)
<input type="checkbox"/> Undergraduate Certificate (05)	<input type="checkbox"/> Associate's Degree (07)	<input type="checkbox"/> Bachelor's Degree (08)
<input type="checkbox"/> Master's Degree (09)	<input type="checkbox"/> Other Advanced Degree (10)	<input type="checkbox"/> Doctoral Degree (11)
<input type="checkbox"/> First Professional Degree (JD, MD, DDS, LLB) (12)	<input type="checkbox"/> Sixth-Year Certificate (13)	

### EDUCATIONAL GOALS

<input type="checkbox"/> Certificate (credit) (CT)	<input type="checkbox"/> Transfer without an Associate's Degree (DN)	<input type="checkbox"/> Improve English Skills/Proficiency (ES)
<input type="checkbox"/> Associate's Degree (DG)	<input type="checkbox"/> Job Preparation/Retraining Course (JB)	
<input type="checkbox"/> Developmental (College Preparation) Education (DV)		
<input type="checkbox"/> Fulfill other college's requirement (AC)	<input type="checkbox"/> Job Promotion (JP)	<input type="checkbox"/> Unsure at this time (UN)
<input type="checkbox"/> Transfer with an Associate's Degree (DT)	<input type="checkbox"/> Personal Development Course(s) (PD)	<input type="checkbox"/> Other Goal (NL) _____

### ACADEMIC BACKGROUND

Do you have a High School Diploma?  Yes  No  Pending Graduation Year \_\_\_\_\_  
Name of High School \_\_\_\_\_ Town \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_  
Do you have a General Equivalency Diploma (GED)?  Yes  No Year \_\_\_\_\_ GED Number \_\_\_\_\_ Town/State \_\_\_\_\_  
Do you have an Adult High School Diploma?  Yes  No Graduation Year \_\_\_\_\_ Town/State \_\_\_\_\_  
Do you have a Home School Diploma?  Yes  No Graduation Year \_\_\_\_\_ Town/State \_\_\_\_\_  
Have you participated in the High School Partnership Program through the CT Community Colleges?  Yes  No  
Have you participated in the College Career Pathways/Tech Prep Program through the CT Community Colleges?  Yes  No

### PREVIOUS COLLEGE BACKGROUND

College/University Name	State	Dates of Attendance	Graduation Date	Degree Awarded

### INTERNATIONAL STUDENT INFORMATION

Are you an International Student who needs an I-20 form for an F1 Visa?  Yes  No

Other Visa Holder (indicate type) \_\_\_\_\_ Visa Admission Number \_\_\_\_\_  
Visa Start Date \_\_\_\_\_ Visa End Date \_\_\_\_\_  
International Address \_\_\_\_\_

### EMPLOYMENT INFORMATION

Employed Full Time  Employed Part-time  Unemployed

Name of Employer \_\_\_\_\_ Address of Employer \_\_\_\_\_

Title/Position \_\_\_\_\_ Does your Employer have a Tuition Reimbursement Program?  Yes  No

### E-MAIL COMMUNICATIONS

I request the College forward to me at the e-mail address I have provided all correspondence, including personally identifiable information pertaining to me from College records that is protected by FERPA.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### CONSENT FOR THE DISCLOSURE OF EDUCATION RECORDS

I understand that to maintain accurate student records, including the records pertaining to my attendance at the College, and for other necessary business purposes, the College may need to release or provide access to personally identifiable information in its records pertaining to me to another College/University in the Board of Regents for Higher Education/Connecticut State Colleges and Universities system or to the system's administrative office. Accordingly, I hereby authorize the College to release or allow access to such information to those indicated for the purposes described.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I understand the College is part of the Connecticut Community College System, which has administrative offices in Hartford, CT. I also understand that to maintain accurate student records, and for other legitimate business purposes, it may be necessary for the College to share personally identifiable information pertaining to me with another College in the System or with the System Office. Accordingly, I hereby authorize the College to release such information contained in my education record for legitimate business purposes relating to my application for admission, registration for courses and my continued enrollment at the College or at any other college in the Connecticut Community College System.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian signature (if under 18) \_\_\_\_\_ Date \_\_\_\_\_