


 FALL
 SPRING
 SUMMER
YEAR
1. Student ID # (If Known)

2. DATE OF BIRTH

MO DAY YEAR

3. IS ENGLISH YOUR PRIMARY LANGUAGE?
 Yes

No

4. EMAIL ADDRESS

5. LEGAL NAME & CURRENT ADDRESS

Last Name: _____

First Name: _____

Middle Name or Initial: _____ Suffix: _____

Gender: Male Female Decline to State

Former or Maiden Name: _____

Current Address: _____

City: _____ State: _____ Zip Code: _____

County: _____

Day Phone Number: (_____) _____ - _____ Evening Phone Number: (_____) _____ - _____

6. U.S. CITIZENSHIP
If NO, check one of the following:

YES NO

 Permanent Resident * Temporary Resident * Amnesty *

 Refugee / Asylee * Student Visa (F1) Other - Specify: _____

*Provide your Alien ID number: _____

Issue Date: ____ / ____ / ____ Exp. Date: ____ / ____ /

7. RACE / ETHNICITY (Check one)

<input type="checkbox"/> African American, Non-Hispanic	<input type="checkbox"/> Guamanian	<input type="checkbox"/> Mexican	<input type="checkbox"/> South American
<input type="checkbox"/> American Indian, Alaskan Native	<input type="checkbox"/> Hawaiian	<input type="checkbox"/> Other Asian	<input type="checkbox"/> Vietnamese
<input type="checkbox"/> Cambodian	<input type="checkbox"/> Indian (Asia)	<input type="checkbox"/> Other Hispanic	<input type="checkbox"/> White, Non-Hispanic
<input type="checkbox"/> Central American	<input type="checkbox"/> Japanese	<input type="checkbox"/> Other Non-White	<input type="checkbox"/> Unknown/Non Respondent
<input type="checkbox"/> Chinese	<input type="checkbox"/> Korean	<input type="checkbox"/> Other Pacific Islander	<input type="checkbox"/> Decline to State
<input type="checkbox"/> Filipino	<input type="checkbox"/> Laotian	<input type="checkbox"/> Samoan	

8. EDUCATIONAL GOAL (Check one)

<input type="checkbox"/> Associate Degree without transfer.	<input type="checkbox"/> Prepare for a new career (acquire job skills).
<input type="checkbox"/> Advance in current job/career (update job skills).	<input type="checkbox"/> Transfer with AA/AS degree.
<input type="checkbox"/> Formulate career interests, plans and goals.	<input type="checkbox"/> Transfer without AA/AS degree.
<input type="checkbox"/> Improve basic skills in English, Reading and Math.	<input type="checkbox"/> Vocational Certificate without Transfer.
<input type="checkbox"/> Maintain certificate or license.	<input type="checkbox"/> Undecided on goal/exploring.
<input type="checkbox"/> Personal Enrichment.	

9. HIGH SCHOOL STATUS (Check one)

- Never attended.
- Academic Enrichment Student
(Will be attending both 9-12 and Sierra).
- Did not graduate.
- Graduated.
- Passed GED.
- Passed CA Proficiency Exam.
- Currently in Adult School.
- Foreign school graduate.

DATE OF HIGH SCHOOL GRADUATION, G.E.D : _____ / _____
MO YEAR

10. ENROLLMENT STATUS (Check one)

- First time Student.
- Attended another college, first time at Sierra.
- Previously attended Sierra College.
If attended Sierra College prior to 1980, when :

_____ / _____
MO YEAR

- Have also attended another college since I attended Sierra College.

11. LAST HIGH SCHOOL ATTENDED

High School: _____

City: _____
County: _____ State: _____

12. MAJOR

Program of study you intend to pursue at this college

OLLI Program uses code - 0 0 0 0

0	0	0	0
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13. LAST COLLEGE/UNIVERSITY ATTENDED (if applicable)

College/University: _____

Year attended: _____

Highest Degree Earned: Associate's Degree Bachelor's Degree or higher

Year highest degree earned: _____

14. Employment

How many hours per week do you expect to work this term?

- None
- 20-29
- 1-9
- 30-39
- 10-19
- 40 or More

15. MATRICULATION

Did you take an assessment Test ? Yes No

Did you attend orientation ? Yes No

Did you Prepare a Student Education Plan ? Yes No

16. NEEDS AND INTERESTS (Check all that apply) - Optional

- Athletics/Intercollegiate Sports
- Basic Skills (reading, writing, math)
- CalWorks
- Career Center
- Community Education
- Counseling - Personal
- Disability Services
- Employment Assistance
- ESL - English as a Second Language
- EOPS - Extended Opportunity Programs and Services
- Financial Aid

- Health services
- Housing / Dorms
- Learning Disability
- Re-Entry Center
- Student Activities
- Study Skills
- Transfer Center
- Tutoring
- Veteran's Benefits

OFFICE USE ONLY

Processed by: _____

Res: _____

Date: _____



STATEMENT OF LEGAL RESIDENCE

The information requested below is deemed relevant and necessary to properly determine your residence status for tuition purposes pursuant to Education Code 68040. Failure to answer all questions may cause you to be classified as a nonresident. You may submit other information that you believe will establish your California residence. If additional information is needed to determine your residence status, you will be required to complete a supplemental questionnaire and/or to present evidence in accordance with Educational Code 68040 et seq. The burden of proof to clearly demonstrate both physical presence and intent to establish California residence lies with the student.

PART A — To be completed by all students

Name: _____

What state do you regard as your permanent home? _____

If it is California, when did your present stay begin? _____ / _____ / _____
Month Day Year

1. Where have you resided in the past 24 months?

City _____	State _____	From _____ / _____ To _____ / _____	
Month _____	Year _____	Month _____	Year _____
City _____	State _____	From _____ / _____ To _____ / _____	
Month _____	Year _____	Month _____	Year _____

2. Are you unmarried and under 19 year of age?

Yes Complete questions 2-8 about your parents
 No Complete questions 2-8 about yourself

If yes, what year? _____

3. Have you filed state income tax in another state? Yes No _____

4. Have you voted in another state? Yes No _____

5. Attended an out-of-state education institution as a resident of that state? Yes No _____

6. Declared residency in another state for income tax purposes? Yes No _____

7. Had a valid driver's license in another state? Yes No _____

8. Registered another vehicle in another state? Yes No _____

PART B — If you are under 19 years of age when classes begin — complete the questions below

1. Have you lived continuously for the past two (2) years with one or both of your parents or court appointed legal guardian?
 Yes No

2. Please indicate your parent's/legal guardian's name(s) and address below:

3. Name: _____ U.S. Citizen Yes No

Current Address: _____

Street _____ City _____ State _____ Zip _____

4. Has the person indicated above claimed you on their Federal or State income tax for this past year?

Yes No

PART C — U. S. Military Status

None apply to me
 Currently active military
 Dependent of currently active military
 Member discharged within the last year
 Member discharged over a year ago (veteran)

Yes No Is California your home of record?
 Yes No Are you currently stationed in California?
 Yes No If stationed in California, is it for educational purposes only?

18. APPLICANT MUST READ AND SIGN (California State Law)

I CERTIFY UNDER PENALTY OF PERJURY THAT THE INFORMATION ON THIS APPLICATION IS TRUE AND CORRECT. I UNDERSTAND THAT FALSIFICATION OF MY INFORMATION MAY RESULT IN DISCIPLINARY ACTION BY THE COLLEGE.

Applicant's Signature: _____ Date: _____



Osher Lifelong Learning Institute at Sierra College

Tuition-free OLLI Course Registration Form – Fall 2024

DIRECTIONS: If you did not take a tuition-free OLLI course in the **Spring 2024** or **Summer 2024** semester, you must complete an application **along with** this course registration form. Applications are available on the OLLI website at www.sierraolli.org or you may request to have one emailed/mailed to you. To request an application, email: olli@sierracollege.edu or scan the QR code below to access now!

Mail forms to:

OLLI at Sierra College
316 Vernon St., Suite 257
Roseville, CA 95678

Email completed forms to:

olli@sierracollege.edu

Scan to open application:

*Use smart phone camera to scan



STUDENT INFORMATION		*Please Update My Information: <input type="checkbox"/>	
Sierra College Student ID # (9 digits if known):			DOB:
First Name:	Last Name:		Middle Initial:
Street:	City:	ST:	Zip:
Phone:	Email:		

Select (X) Tuition-free OLLI Courses Below:

COURSE TITLE	DATES and TIME	LOCATION	CRN	X
ENGL 0814				
Ongoing Memoir Writing <i>Judie Rae</i>	Tues, 9/3-10/8, 1pm-3pm 6 sessions	Nevada County Campus: N8-103	82122	
MUSIC 0810				
Truckee-Tahoe Community Chorus <i>Brittney May</i>	Mon, 8/19-12/9, 5:45pm-8:35pm 14 sessions *No class: 9/2, 10/14, & 11/11.	Tahoe-Truckee Campus: T1-231	81982	
Truckee-Tahoe Community Band <i>Randy Humphreys</i>	Wed, 8/21-12/4, 6pm-9:05pm 15 sessions *No class: 10/16	Tahoe-Truckee Campus: T1-231	82140	
Brahms: The Music <i>Stephen Miller</i>	Mon, 8/26-10/7, 10am-12pm 6 sessions *No class: 9/2	Roseville Center Vernon: Rm-259	82119	
Brahms: The Music <i>Stephen Miller</i>	Tues, 8/27-10/8, 10am-12pm 6 sessions *No class: 9/3	Nevada County Campus: N15-101	82117	
Tchaikovsky: The Music <i>Stephen Miller</i>	Mon, 10/21-12/2, 10am-12pm 6 sessions *No class: 11/11	Roseville Center Vernon: Rm-259	82120	
Tchaikovsky: The Music <i>Stephen Miller</i>	Tues, 10/22-12/3, 10am-12pm 6 sessions *No class: 11/12	Nevada County Campus: N15-101	82118	
THEA 0809				
Food and Film - Objectivity, Art, and Moral Heritage <i>Ellen Sander</i>	Tues, 9/3-10/8, 1pm-4pm 6 sessions	Roseville Center Vernon: Rm-259	82520	
Food and Film - Objectivity, Art, and Moral Heritage <i>Ellen Sander</i>	Wed, 9/4-10/9, 1pm-4pm 6 sessions	Nevada County Campus: N12-103	82521	
La otra mirada: The Other Viewpoint <i>Ellen Sander</i>	Tues, 10/22-11/26, 1pm-4pm 6 sessions	Roseville Center Vernon: Rm-259	82522	
La otra mirada: The Other Viewpoint <i>Ellen Sander</i>	Wed, 10/23-12/4, 1pm-4pm 6 sessions *No class: 10/30	Nevada County Campus: N12-103	82523	

X**Signature****Date**