



Admission Application for High School Students

FOR OFFICE USE:	<input type="checkbox"/> New	<input type="checkbox"/> Returning
<input type="checkbox"/> Huskins	<input type="checkbox"/> Dual	<input type="checkbox"/> ECHS
<input type="checkbox"/> L & E Online		
Date Entered:	_____ By: _____	
Colleague ID:	_____	

Please print. All fields must be completed.

SOCIAL SECURITY NUMBER*: _____ - _____ - _____

NAME: _____, _____, _____
Last First Middle

ADDRESS: _____
Permanent Mailing Address City State Zip

PHONE: _____
Home Phone Cell Phone Email Address

BIRTHDATE (MM/DD/19YY): ____/____/____ GENDER: Male Female

ETHNICITY: Are you Hispanic or Latino? Yes No

RACE: (Check one or more.)

- American Indian/ Alaska Native
- Asian
- Black/ African American
- Hawaiian/Pacific Islander
- White

SCHOOL NAME: _____ Specify: Public Private Home

Expected Graduation Date (MM/20YY): ____/____ Highest Grade Completed: 8th 9th 10th 11th

Are you in any of the following programs (check all that apply): New Century Scholars Upward Bound Gear-UP

EMERGENCY CONTACT:

Name & Relationship: _____ Phone Number: _____

CURRENT EMPLOYMENT STATUS:

- Unemployed-seeking
- Employed 1-10 hours per week
- Unemployed-not seeking
- Employed 11-20 hours per week
- Employed 21-39 hours per week
- Employed 40 or more hours per week

FAMILY EDUCATIONAL INFORMATION:

FATHER/ GUARDIAN 1: (Check one)

- Highest Grade Completed (1-12) _____
- GED
- 1 Year Diploma/ Certificate
- 2 Year Associate Degree
- Bachelors Degree
- Masters Degree or Higher

MOTHER/ GUARDIAN 2: (Check one)

- Highest Grade Completed (1-12) _____
- GED
- 1 Year Diploma/ Certificate
- 2 Year Associate Degree
- Bachelors Degree
- Masters Degree or Higher

INTERESTED IN (check all that apply): Online In Person ITV COURSES: _____

CERTIFICATION OF ACCURACY * AGREEMENT TO ABIDE BY COLLEGE RULES * PERMISSION TO USE PHOTO

I certify that all the information I have given is accurate to the best of my knowledge. I agree to observe all rules and regulations of Southwestern Community College (SCC). I agree to allow SCC to publish personal directory information pertaining to honor rolls, scholarships, athletic events, news releases and to use personal directory information and photos in other publications of the college. All students enrolling at SCC shall be deemed to have agreed to publication of personal data and photos as indicated above unless a disclaimer is submitted to the Registrar by the 10th day of the semester in which initial enrollment is made. I understand that this application is for enrollment in college courses, and acknowledge that the college environment and curriculum will be challenging and rigorous. I authorize release of my SCC progress and grade(s) to my high school. I agree that this application shall remain in force until my/my child's graduation from high school, unless rescinded in writing. As parent/guardian of this minor child, I authorize submission of this complete application.

Signature of Student _____ Date _____

Signature of Parent/ Guardian _____ Date _____

* SCC collects social security numbers from all applicants for admission to ensure accurate records for required federal and state reporting. The College protects and restricts access to this information. A student ID# is assigned to each student.