



SOUTHWESTERN COMMUNITY COLLEGE
 447 College Drive, Sylva, NC 28779
 828.339.4000 or 800.447.4091
 www.southwesterncc.edu

FOR ADVISOR USE:	<input type="checkbox"/> New	<input type="checkbox"/> Program Change	<input type="checkbox"/> Update	Advisor Initials _____
School:	<input type="checkbox"/> HS	Grade Level:	<input type="checkbox"/> Fr. <input type="checkbox"/> So. <input type="checkbox"/> Jr. <input type="checkbox"/> Sr.	
Program:	<input type="checkbox"/> College Transfer Pathway - _____		<input type="checkbox"/> CareerTech Pathway - _____	
Start Term:	_____			
FOR ADMISSIONS USE:	Colleague # _____	Date _____	By _____	

HIGH SCHOOL STUDENT APPLICATION FOR ADMISSION

Please print. All fields must be completed. Use black or blue ink only.

SOCIAL SECURITY #: _____ [* 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.]

NAME: _____
Last
First
Middle

MAILING ADDRESS: _____
Street and Number/PO Box
City
State
Zip

HOME PHONE: (_____) _____ - _____ **CELL PHONE:** (_____) _____ - _____

EMAIL: _____

BIRTH DATE: ____/____/____ **GENDER:** F M

ETHNICITY: Are you Hispanic or Latino? Yes No

RACE (check one or more): American Indian/Alaska Native Asian Black or African American
 Hawaiian/Pacific Islander White

HIGH SCHOOL: _____ Specify: Public Private Home

EXPECTED GRADUATION DATE (MM/YYYY): ____/____ Highest Grade Completed: 8th 9th 10th 11th

STUDENT'S EMPLOYMENT STATUS:

- Unemployed – Not Seeking a Job
- Unemployed – Seeking a Job
- Employed 1-10 Hrs/wk
- Employed 11-20 Hrs/wk
- Employed 21-39 Hrs/wk
- Employed 40+ Hrs/wk

EMERGENCY CONTACT:

Name & Relationship: _____

Phone Number: _____

FAMILY EDUCATIONAL INFORMATION:

Indicate highest level of education completed for each parent:

	Father	Mother
Highest Grade Completed	____ (1-12)	____ (1-12)
GED	<input type="checkbox"/>	<input type="checkbox"/>
1-Year Diploma/Certificate	<input type="checkbox"/>	<input type="checkbox"/>
2-Year Associate Degree	<input type="checkbox"/>	<input type="checkbox"/>
Bachelors Degree	<input type="checkbox"/>	<input type="checkbox"/>
Masters Degree or Higher	<input type="checkbox"/>	<input type="checkbox"/>

PATHWAY OF INTEREST: _____

CERTIFICATION OF ACCURACY * AGREEMENT TO ABIDE BY COLLEGE RULES * PERMISSION TO USE PHOTOS
 I certify that all the information that I have given in this application is accurate to the best of my knowledge, and I agree to observe all rules and regulations of Southwestern Community College (SCC). I further 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 the initial enrollment is made. I understand that all students enrolled in courses at SCC will have access to SCC services including, but not limited to, counseling, Learning Assistance Center, and tutoring. 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 graduation from high school, unless rescinded in writing.

Signature of Applicant _____ Date _____