



Application for Admission

PLEASE PRINT AND CHECK BOXES AS APPROPRIATE

Colorado Mountain College does not discriminate on the basis of race, color, national origin, sex, age, or disability in admission or access to, or treatment or employment in its educational programs or activities. Inquiries concerning Title VI, Title IX, and Section 504 may be referred to the CMC Director of Human Resources.

OFFICE USE ONLY			
Colleague ID #	Location	Tuition Classification <input type="checkbox"/> ID <input type="checkbox"/> IS <input type="checkbox"/> OS	Staff Signature
			Date

PERSONAL INFORMATION

Please indicate the year and term you wish to enroll: Summer Fall Spring Year _____

SOCIAL SECURITY NUMBER ____ - ____ - ____	OR	TAX PAYER ID NUMBER ____ - ____	BIRTHDATE ____/____/____	GENDER <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
LAST NAME		FIRST NAME		MIDDLE NAME

ADDRESS INFORMATION

STREET ADDRESS	CITY	STATE	ZIP CODE
MAILING ADDRESS (IF DIFFERENT FROM STREET ADDRESS)	CITY	STATE	ZIP CODE
COUNTY OF PERMANENT RESIDENCE:	STATE OF PERMANENT RESIDENCE:		

PHONE & EMAIL INFORMATION

HOME PHONE W/AREA CODE ____ - ____ - ____	(CHECK ONE) <input type="checkbox"/> WORK OR <input type="checkbox"/> CELL PHONE	EMAIL ADDRESS
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GENERAL INFORMATION

NAME OF LAST HIGH SCHOOL ATTENDED	CITY	STATE
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Type of Secondary Diploma:

- High School Diploma; Year Received: (____)
- G.E.D.; Year Received: (____)
- Currently enrolled in High School or Home Schooled. Expected Graduation Date (12/2008): (____)
- Non-Graduate

Ethnic Origin:

- 1 Non-Resident Alien
- 2 Black Non-Hispanic
- 3 American Indian or Alaskan Native
- 4 Asian or Pacific Islander
- 5 Hispanic
- 6 White Non-Hispanic
- 7 Other

ENROLLMENT DATA

While at CMC, which best describes your program of study/major?

- Associate of Arts (AA) in: _____
- Associate of Science (AS) in _____
- AAS Degree (Career & Technical) in: _____
- Certificate (Career & Technical) in: _____
- Associate of General Studies in: _____
- For occupational upgrade, but not for degrees/certificate
- Undeclared

Please indicate planned length of study at CMC:

- 1 Semester 1 Year 2 Years More than 2 years

Which CMC site/campus will you attend?

Which best describes your current status?

- N New student, first college attended
- R Re-entering former CMC student

Transfer, attended another college:

- TC Will transfer credit into CMC
- TN Will not transfer credit into CMC

Do you plan to transfer to another institution?

- NOTRN No, I do not plan to transfer
- AFTR4 Yes, to a 4 year school after CMC graduation
- BFRE4 Yes, to a 4 year school before CMC graduation
- AFTR2 Yes, to a 2 year school after CMC graduation
- BFRE2 Yes, to a 2 yr school before CMC graduation

Please check your main educational goals:

- Learn skills to get better jobs
- Learn skills to advance in current job
- Increase personal income
- Improve skills in reading, writing, math
- Personal interest
- Maintain license
- Other

Which best describes the level of education you have completed? (Choose One)

- L Less than High School H High School Graduate/GED C Certificate A Associate Degree B Bachelor's Degree M Masters Degree D Doctorate

Have your parents attended college? Mother Father Both Neither Unknown

Have your parents earned a baccalaureate (4-year) degree? Mother Father Both Neither Unknown

Would you like information about support services available for students with disabilities? Yes No

Do you consider yourself economically disadvantaged? Yes No Do you consider yourself academically disadvantaged? Yes No

Is your primary language other than English? Yes No Language: _____

Do you consider yourself a displaced homemaker? Yes No Do you consider yourself a single parent? Yes No

SIGNATURE(S) REQUIRED

Please complete and sign reverse side.

SELECTIVE SERVICE

Information on Selective Service registration status must be provided in order to comply with Colorado State Law. Individuals providing false information are subject to penalty of law. Most males age 18 – 25 are required to register with the Selective Service.

Are you required to register with the Selective Service? Yes No

If yes, are you registered? Yes No

VETERAN/MILITARY SERVICE

- None
- 1 Veteran or Dependent Eligible for VA Educational Benefits
- 2 Veteran Not Eligible for VA Educational Benefits
- 3 Active Duty Veteran
- 4 Active Duty Military

CITIZENSHIP

Are you a U.S. Citizen? Yes No

If no, what nation? _____

Visa Type: _____

DATE AUTHORIZED STAY EXPIRES:
(attach a photocopy – front & back)

OR ALIEN REGISTRATION NUMBER:
(attach a photocopy – front & back)

OR Note: If under 23 years of age, you must supply copy of Parents Alien Registration or citizenship documents.

Check this box, if the following statement is correct.

I have no official classification with the Department of Immigration and Customs Enforcement

TUITION CLASSIFICATION (Has no effect on admission to the College)

Are you claiming to be a Colorado Resident for tuition purposes? Yes No

Current Age _____. If you are under the age of 23, information concerning your parent or court appointed guardian (attach photocopy of court orders) is required.

If you are claiming to be a Colorado Resident, **completion of all questions in this section is required** to determine eligibility for In-State or In-District Tuition. State of Colorado Title 23, Article 7, 101 to 107, C.R.S.1973, as amended, defines the information required.

	Student Information	OR	Parent/Guardian Information
Dates of continuous physical presence in Colorado (Month Day Year)	to Present		to Present
Dates of continuous physical presence in CMC District (Month Day Year)	to Present		to Present
List last 2 years Colorado income taxes have been filed			
Date current Colorado Driver's License or Colorado ID was issued (Month Year) & Number	#		#
If current Colorado Driver's License was issued less than two years ago, in which state was the previous license issued?			
List last 2 years of Colorado Motor Vehicle registration (Month Year)			
License Plate Number	#		#
Date of Colorado Voter Registration (Month Year)			
Parent's Name if Parent Info Provided			
Dates of extended absences from Colorado during the last 2 years (Month Day Year) (gone for more than one month at a time)	to		to
Have you ever been married? Date of that marriage (Month Day Year) (Answer only if you are under 23 at the time of application)			
List the last 2 years of employment	EMPLOYER		EMPLOYER
	CITY STATE FROM TO		CITY STATE FROM TO
	EMPLOYER		EMPLOYER
	CITY STATE FROM TO		

COLLEGE EDUCATION

Other names used at higher education institutions: _____

List of colleges attended or attending (do not include CMC):

COLLEGE NAME	CITY	STATE	DATE OF ATTENDANCE	DEGREE EARNED

If you have earned college credits at another institution that you plan to transfer to CMC or use as a prerequisite for a CMC class or to gain exemption from a required placement test, please request that your official transcripts be sent to CMC from each institution attended. If you have attended more than two institutions, attach another sheet with the additional information.

SIGNATURE

I certify, under penalty of perjury, that the information presented on this form is true and complete. If asked by an authorized official, I agree to give proof of the information I have provided. If the student is under 18 years of age at the time the application is signed, the student's parent or court appointed guardian must sign this application.

SIGNATURE	DATE
PARENT/COURT APPOINTED GUARDIAN SIGNATURE	DATE

Don't forget to sign and date this form!