

Sacramento Regional Public Safety Training Center-American River College

PLEASE PRINT. COMPLETE ALL SECTIONS ON THE FRONT AND REVERSE SIDE OF THIS APPLICATION.

Last Name: _____ First Name: _____ M.I.: _____
SSN: _____--____--_____ (OR) Los Rios Student ID#: _____ Gender (circle one): M F
Citizenship: US Citizen* (OR) Permanent Alien Resident # _____ Issue Date: ___/___/___
Date of Birth: ___/___/___ Primary Language: _____ Ethnicity: _____
Previous last names: _____ E-mail address: _____

I DECLARE under penalty of perjury that the statements and information submitted on this application are true and correct.
I UNDERSTAND that falsification, withholding pertinent data or failure to report a change in residency may result in my dismissal.
I UNDERSTAND that all materials and information submitted by me for purposes of enrollment become LRCCD property and part of my official college record.
I UNDERSTAND AND ACCEPT that by providing my signature and today's date, I acknowledge my agreement with the acceptance of these four statements.

SIGNATURE: _____ **DATE:** _____

Mailing Address: _____ **Apt. #** _____

City: _____ **State:** _____ **Zip Code:** _____

Phone Number: (day) (_____) _____; (evening) (_____) _____

Permanent Address (if different from mailing address): _____ **Apt. #** _____

City: _____ **State:** _____ **Zip Code:** _____

Semester: ___ Fall 2009: ___ Spring 2010: ___ Summer 2010: ___ Fall 2010: **Major:** _____

ENROLLMENT STATUS (Please check one)

- _____ NEW-Never before earned college units
- _____ NEW-Earned college units while in HIGH SCHOOL
- _____ NEW TRANSFER-Former student at another college or university (including graduates)
- _____ RETURNING-Returned after an absence; did not attend another college since leaving
- _____ RETURNING TRANSFER-Former student at this college; also attended another college or university
- _____ ~~AE-Currently enrolled in High School~~

RESIDENCY INFORMATION (Not optional, must complete)

What date did your present stay in California begin: ___/___/___

*****if you have resided in California for less than 2 years and will be employed as a California Peace Officer, please see an American River College Representative**

PRIOR EDUCATION AND CURRENT PLANS

<p>What is your educational goal? (circle one)</p> <ul style="list-style-type: none">1 Acquire Job Skills2 Associate Degree, General Ed.3 Associate Degree, Vocational4 Certificate in Vocational Program5 Complete credits for H. S. Diploma6 Discover Career interests, Plans, Goals7 Educational Development8 Improve Basic Skills in English, Reading or Math9 Maintain Certificate or License (nursing)10 Transfer to 4-Year College with Assoc. Degree11 Transfer to 4-year College without Assoc. Degree12 Upgrade Job Skills13 Undecided	<p>Please estimate the time that it will take to complete your goal: (circle one)</p> <ul style="list-style-type: none">1 One semester or less2 Two semesters (one year)3 Three semesters4 Four semesters (two years)5 Six semesters (three years)6 More than three years7 Unknown	<p>What is the highest education level you have completed? (circle one)</p> <ul style="list-style-type: none">1 Have not obtained H. S. Diploma2 High School Diploma3 Certificate of Completion4 Certificate of equivalency5 G. E. D.6 California H.S. proficiency exam7 Foreign secondary school diploma/certificate8 Associate Degree9 Baccalaureate degree or higher10 Degree from outside U. S. <p>Please enter the year when your Diploma, Certificate or Degree was awarded: _____</p>
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HIGH SCHOOL INFORMATION (answer only if you are 25 or younger)

Where did you last attend high school? <i>(circle one)</i> 1 California 2 Another state 3 Outside the U. S. 4 I did not attend high school	California High School Students ONLY Name of School _____ City _____	High School Graduation date: Month _____ Year _____	Please indicate GPA: <i>(check one)</i> <input type="checkbox"/> 1.99 or below (low C or below) <input type="checkbox"/> 2.00 – 2.49 (C) <input type="checkbox"/> 2.50– 2.91 (high C) <input type="checkbox"/> 3.00 – 3.49 (B) <input type="checkbox"/> 3.50 – 4.00 (high B and above) <input type="checkbox"/> N/A
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COLLEGE ATTENDANCE (if you graduated from or attended college)

College: _____ Date last attended: _____

City: _____ State: _____

Approx. # of units: _____ Degree? _____

ADDITIONAL APPLICANT INFORMATION

What are your expected hours of employment per week during this semester? _____

(You may choose not to answer the following questions; however, you must indicate that you “decline to answer.”)

What is your Gross Annual Household Income? *(Please include all members of your household)* \$ _____

How many individuals are in your household? _____

What is the highest education level each of your parents achieved? Mother _____ Father _____

PLEASE RESPOND

YES NO

	YES	NO
Are you enrolled in adult school?		
Are you enrolled in the Workforce Investment Act Program (WIA)?		
Are you enrolled in fewer than six semester units?		
Are you currently enrolled in another college in addition to the Los Rios college system?		
Do you have a degree Objective or Occupational Objective?		
Are you currently receiving TANF/Cal-Works?		
Are you currently receiving SSI?		
Are you currently benefits from General Assistance?		
Are you a single parent with custody of a minor child?		
Are you a displaced homemaker?		
If you desire information about or have a need of any College Program Services, please circle each one:		
Financial Aid Health Services DSPS Child care Learning Disabilities Transfer Services Job Placement		
Basic Skills Tutoring/Supplemental Instruction ESL Career planning services EOPS Veteran’s Services		
Re-Entry Services Associated Student Government		