## APPLICATION FOR ADMISSION

**1. Student Identification Number**
(Leave blank unless you have previously been assigned a Student Identification Number)

<table>
<thead>
<tr>
<th>Last</th>
<th>First</th>
<th>Middle Initial</th>
</tr>
</thead>
<tbody>
<tr>
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</table>

The social security number will no longer be used as primary student identifier for students per Civil Code 1798.85. Student Information System (SIS) will generate an identification number for each student who is new to LACCD. Leave blank if you have not been assigned a SID by the district.

**2. Social Security Number**

<table>
<thead>
<tr>
<th>Last</th>
<th>First</th>
<th>Middle Initial</th>
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<tbody>
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</table>

Students are required by law to provide their Social Security Number, which will be used for reporting to the federal government under the Taxpayer Relief Act of 1997 and for financial Aid verification. If you do not have a Social Security number, or if you do not wish to use it, please leave blank.

**3. Legal Name**

<table>
<thead>
<tr>
<th>Last</th>
<th>First</th>
<th>Middle Initial</th>
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</table>

**List other names you have used.** If none, check box:

<table>
<thead>
<tr>
<th>Last</th>
<th>First</th>
<th>Middle Initial</th>
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<tbody>
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</tbody>
</table>

**4. Legal Address/Residence**

(Do not use P.O. Box or Business Address)

<table>
<thead>
<tr>
<th>Number</th>
<th>Street</th>
<th>Apt. No.</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

City | State | Zip Code
<table>
<thead>
<tr>
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<tbody>
<tr>
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</tbody>
</table>

I have lived at this address since:

<table>
<thead>
<tr>
<th>Month</th>
<th>Day</th>
<th>Year</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</table>

**5. Alternate Identification Number**

If you are a returning student and have been previously assigned an Alternate Identification Number by the district, please complete. Otherwise leave blank.

**6. This application is for:**

<table>
<thead>
<tr>
<th>Fall</th>
<th>Winter</th>
<th>Male</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>Spring</th>
<th>Summer</th>
<th>Female</th>
</tr>
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<tbody>
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</table>

**7. Sex**

<table>
<thead>
<tr>
<th>Year</th>
</tr>
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<tbody>
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</table>

**8. Birth Date**

<table>
<thead>
<tr>
<th>Month</th>
<th>Day</th>
<th>Year</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

**9. If you have lived at your present address fewer than two years, list previous address(es)**

<table>
<thead>
<tr>
<th>Number/Street/Apt. No.</th>
<th>City/State</th>
<th>FROM: Mo/Yr</th>
<th>TO: Mo/Yr</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Number/Street/Apt. No.</th>
<th>City/State</th>
<th>FROM: Mo/Yr</th>
<th>TO: Mo/Yr</th>
</tr>
</thead>
<tbody>
<tr>
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</table>

**10. Mailing Address**

(If different from Legal Address given above)

<table>
<thead>
<tr>
<th>Number/Street/Apt. No.</th>
<th>City/State</th>
<th>Zip Code</th>
</tr>
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<tbody>
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</table>

**11. My present stay in California began on:**

<table>
<thead>
<tr>
<th>Month</th>
<th>Day</th>
<th>Year</th>
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<tbody>
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</table>

Are any of the following on active military duty? (Please check all that apply)

<table>
<thead>
<tr>
<th>Yourself</th>
<th>Spouse</th>
<th>Parents</th>
</tr>
</thead>
<tbody>
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</table>

**12. The questions below must be answered by every applicant.**

At any time in the past two years have you:

- Registered to vote in a state other than California? ……………………… Yes No If yes, what year? __________
- Filed a legal action in a state other than California? ……………………… Yes No If yes, what year? __________
- Attended a non-California college/university as a resident of that state? Yes No If yes, what year? __________
- Filed as a Non-Resident for California State Income Tax Purposes? …… Yes No If yes, what year? __________

**13. Contact Information**

Primary Telephone: (_______) Area Code Number

E-mail: ____________________________

**14. Place of Birth**

City | State or Foreign Country
<table>
<thead>
<tr>
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**15. Full name of the most recent High School you attended**

<table>
<thead>
<tr>
<th>Name of High School</th>
<th>City</th>
<th>State or Foreign Country</th>
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<tbody>
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**16. Last College attended.** If none, check box:

Name of College | Dates Attended
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<tbody>
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</table>

City/State/Foreign Country | Degree Awarded
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**17. I am a citizen of**

Country

**18. If you are not a United States Citizen, please circle and complete:**

- Permanent Resident Alien
- Temporary Resident Alien
- Refugee, Asylee
- Student Visa (F-1 or M-1 visa)
- Other (Specify): __________________ Issue/Adjustment Date

<table>
<thead>
<tr>
<th>City</th>
<th>East Harbor</th>
<th>Mission</th>
<th>Pierce</th>
</tr>
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<tbody>
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</table>

<table>
<thead>
<tr>
<th>Southwest</th>
<th>Trade Tech</th>
<th>Valley</th>
<th>West LA</th>
<th>ITV</th>
</tr>
</thead>
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**CONTINUE ON OTHER SIDE**
19. Complete this question only if you are under 19 and have never been married.

Name of Parent or Legal Guardian: ____________________________________________________________

Relationship to you:  Father □  Mother □  Legal Guardian □  Other ________

Is the person a:  U.S. Citizen □  Permanent Resident Alien □  Other __________

If a Permanent Resident Alien, enter "A-Number" and date of issue: ____________________________________________________________

Current residence of this person: ____________________________________________________________

State From: ________ To: PRESENT

Month/Year

20. Ethnic Identity (*) Please enter number in box

10 = Chinese
11 = Japanese
12 = Korean
13 = Lao
14 = Cambodian
15 = Vietnamese
16 = Indian Sub-Continent
17 = Other Asian
18 = Other

19 = Other Sub-Continent
20 = Black, African-American
30 = Filipino
40 = Mexican, Chicano,
51 = Central American
60 = American Indian, Alaskan Native
70 = Pacific Islander; Samoan
71 = Pacific Islander; Hawaiian
72 = Pacific Islander; Guamanian
79 = Other Pacific Islander
80 = Other Non-White
90 = Decline to state

21. What is your primary language? (*) Please enter number in box

1 = English
2 = Armenian
3 = Chinese
4 = Farsi
5 = Filipino
6 = Japanese
7 = Korean
8 = Russian
9 = Spanish
10 = Vietnamese

22. What is your main educational goal? Please enter number in box

1 = Prepare for a new career (acquire new job skills)
2 = Advance in current job/career (update job skills)
3 = Discover/develop career interests, plans and goals
4 = Obtain a two-year vocational degree without transfer
5 = Obtain a two-year Associate degree without transfer
6 = Obtain a vocational certificate without transfer
7 = Obtain a Bachelor’s degree after completing an Associate’s degree
8 = Obtain a Bachelor’s degree without completing an Associate’s degree
9 = Maintain certificate or license (e.g. Nursing, Real Estate)
10 = Improve basic skills in English, reading or math
11 = Complete credits for high school diploma or GED
12 = Personal development (intellectual, cultural)
13 = Undecided on goal

23. Special Services (*)

The Los Angeles Community College District is committed to increasing your educational success. Each area listed below provides special services. Please indicate those services that interest you.

1. □ Financial Aid
2. □ Child Care
3. □ Tutoring
4. □ Transfer Assistance
5. □ Employment Assistance
6. Information regarding special services and/or accommodations for students with disabilities may be obtained from the Disabled Student Program (DSPS) Office.
7. Are you from a low income family and in need of special counseling, tutoring, and/or financial aid assistance? □ Yes □ No

(*) NOTICE TO STUDENTS: Your responses to questions marked by this symbol will be used to provide you with information on college programs and services and/or for statistical purposes only. Refusal to provide this information will not be used to deny admission to the college or any of its programs.

If additional information is needed to determine your residence status you will be required to complete a supplemental residence questionnaire and/or to present evidence in accordance with Education Code sections 68040 et seq. The burden of proof to clearly demonstrate both physical presence in California and intent to establish California residence lies with the student.

24. Highest Education Status: Please enter number and year in boxes below

1 = Earned a U.S. High School diploma (or will earn one before college semester begins)
2 = Enrolled in grade 12 or below when college semester begins
3 = Not a High School graduate, currently enrolled in adult school
4 = Not a High School graduate, last attended High School
5 = Passed the GED or received a certificate of H.S. equivalency
6 = Earned California High School Proficiency Certificate
7 = Earned a Foreign Secondary diploma or certificate of graduation
8 = Earned an Associate degree
9 = Earned a Bachelor’s or higher degree

25. Enrollment Status: Please enter number in box

1 = First time college student
2 = First time at this college, after attending another college
3 = Returning to this college, after attending another college
4 = Returning to this college, without having attended another college
5 = Enrolling in this college, while attending school in the 12th or lower grade
6 = A.A., A.S., B.A., B.S. or higher degree

26. College Units or degree completed by first day of this term Please enter number in box

1 = 0 units
2 = 1 ½ to 15 ½
3 = 16 to 29 ½
4 = 30 to 59 ½
5 = 60 or more units, no degree
6 = A.A., A.S., B.A., B.S. or higher degree

27. Veteran (Leave blank, unless you are a veteran)

Were you honorably discharged from the U.S. Armed Forces? □ Yes □ No

28. Student Information -- Permission to Release

TYPES OF STUDENT INFORMATION:
1) Directory Information: name, city of residence; participation in officially recognized activities and sports; weight and height of athletic team members; dates of attendance; degrees and awards received; and the most recent previous educational institution attended. 2) College Foundation Information: name, address, and telephone number. 3) Four-year College Information: name, address, and phone number. 4) Military Recruiting Information: “Directory information” plus address, telephone number, date of birth, and major field of study.

You may change your Directory Release at any time by completing a Release of Directory Information form and returning it to the Admissions Office.

29. Certification

I declare under penalty of perjury that all information on this form is correct. I understand that falsifying or withholding information required on this form shall constitute grounds for dismissal.

REQUIRED SIGNATURE __________________________________________ Date ____________________________

NON-DISCRIMINATION POLICY

All programs and activities of the Los Angeles Community College District shall be operated in a manner which is free of discrimination on the basis of race, color, national origin, ancestry, religion, creed, sex, pregnancy, marital status, sexual orientation, age, handicap or veterans status (Reference: Board Rule 1202)

In order to ensure the proper handling of all civil rights matters, each college in the District has its own Affirmative Action Representative, Title IX/Sex-Equality Coordinator, Section 504 Coordinator of Handicap Programs, and an Ombudsperson. Direct initial inquiries to the Office of Diversity Programs at (213) 891-2000.

Revised: 6/2006