



**CALHOUN
COMMUNITY
COLLEGE**

Your Community. Your College. Your Future.

**Calhoun Community College
APPLICATION FOR ADMISSION**

Admissions Office
P.O. Box 2216 • Decatur, AL 35609-2216
256/306-2500 or 1-800-626-3628
www.calhoun.edu

According to State Board Policy 801.01: Admission; All new/readmission students must provide one Primary Form of Documentation or Two Secondary Forms of Documentation (one of which must be a picture ID) for Admission to Alabama Community Colleges. All International Students must provide an acceptable VISA.

Documentation must be submitted in person to the admissions office -OR- a notarized copy may be mailed to the admissions office.

Registration for classes will not be allowed until the Admissions Office has received appropriate documentation.

PLEASE PRINT

USE BLUE/BLACK INK

| | | | | |
|--|------|-------|--------|--------|
| Full Legal Name <input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs. | Last | First | Middle | Suffix |
|--|------|-------|--------|--------|

Please provide any former names you may have used while attending high school or college (Please include first, middle, and last name). →

| | | | | |
|---|--|-------------------|----------------|------------------|
| Gender <input type="checkbox"/> M <input type="checkbox"/> F | Social Security Number _____ - _____ - _____ | Birth Date / / | State of Birth | Country of Birth |
|---|--|-------------------|----------------|------------------|

MAILING ADDRESS

| | | | |
|------|-------|-----|--------|
| City | State | Zip | County |
|------|-------|-----|--------|

PERMANENT ADDRESS (Check here if same as mailing)

| | | | |
|------|-------|-----|--------|
| City | State | Zip | County |
|------|-------|-----|--------|

| | | | |
|-------------|-------------|-------------|---------|
| Cell Phone: | Home Phone: | Work Phone: | E-mail: |
|-------------|-------------|-------------|---------|

| | | |
|--|--------------|-----------|
| Person to contact in case of emergency | Relationship | Telephone |
|--|--------------|-----------|

Have you previously applied for admission to Calhoun? Yes No If yes, did you attend classes at Calhoun? Yes No

TERM OF ENROLLMENT
 Fall Year _____
 Spring
 Summer

List your intended academic program

CITIZENSHIP
 U.S. Citizen
 Permanent Resident (non-citizen)
 Foreign Visa _____
 Indicate country of citizenship if other than U.S. _____

ENTRY STATUS
 Accelerated high school student
 Dual Enrollment/High School
 First time freshman (high school graduate)
 First time freshman (earned a GED)
 Returning Calhoun student
 Transfer student
 Transient student
 Senior citizen (60 or older)

PRIMARY REASON FOR ENROLLMENT
 Earn a degree and transfer to another college/university (A.A. or A.S)
 Complete credits/courses for transfer to another college/university
 Earn a degree (A.A.S.) - Technical/ Occupational
 Earn a certificate
 Learn skills to attain a job
 Learn skills to advance in job
 Improve skills in English, reading and/or math
 Take courses for personal interest
 Take courses as a transient student

ETHNIC ORIGIN
 Hispanic
 Non-Hispanic
 Unknown

Military
 Military dependent

RACE (Check all that may apply)
 White
 Black/African American
 Asian
 American Indian or Alaskan Native
 Native Hawaiian or Other Pacific Islander
 Non-Resident Alien

Did your parent(s) attend college?
 Yes No

