

Application for Admission

MAIL THIS COMPLETED APPLICATION ALONG WITH THE \$20.00 APPLICATION FEE TO:

South Central College
 Attn: Admissions Office
 1225 Third Street SW • Faribault, MN 55021

OR

South Central College
 Attn: Admissions Office
 1920 Lee Boulevard • North Mankato, MN 56003

If you are an international student, please visit the admissions webpage at www.southcentral.edu to complete the International Student Application.

Print or type using blue or black ink. Applicant must sign and date this application. Complete your answers accurately. Misrepresentation of application information is sufficient grounds for canceling admission.

Personal Information

Name (Last, First, Middle) _____ Date of Application _____

Name used in high school records or in other educational records and transcripts if different from above (Optional) (Last, First, Middle) _____

Social Security Number _____

SCC uses social security numbers for student identification purposes on student records. Providing your social security number is voluntary. If you do not provide this number, your application will still be processed. This data is requested for purposes of administration, program evaluation and consumer and alumni data. Your number also may be used to create summary information about Minnesota State System programs through data matches with other state agencies.

Current Mailing Address (House/Apartment Number, Street, P.O. Box/Rural Route) _____

City _____ State _____ Zip Code _____ County _____

Permanent Address If different from above (Street, P.O. Box/Rural Route) _____

City _____ State _____ Zip Code _____ County _____

Home Phone _____ Cell Phone _____ E-Mail Address _____

Are you a resident of Minnesota? yes no
 If yes, how long? _____ years _____ months
 If no, what state are you a resident of? _____

Are you a U.S. citizen? yes no
 If not, type of VISA: _____
 Permanent Resident: (if applicable) Refugee Resident Alien Other _____

Admissions Information

Name of program, major, or curriculum you plan to follow
 (e.g. Automotive Service, Nursing, etc. For a list of SCC majors and programs visit www.southcentral.edu. Write 'undecided' if you are unsure of your intended major, but indicate any alternatives you are considering.)

1. _____ 2. _____

What is your current educational intent at this institution?

- Complete courses, but not a degree
 Earn an associate (two-year) degree (A.A.S./A.S.)
 Earn an associate (two-year) degree and transfer
 Earn an occupational certificate
 Complete courses and transfer without a degree
 Earn a diploma of occupational proficiency

What term do you intend to begin taking courses? (Check only one and indicate the year)

- Fall _____(year)
 Spring _____(year)
 Summer _____(year)

Do you plan to attend Full-Time or Part-Time? Full-Time (12 or more credits) Part-Time (fewer than 12 credits)

Have you attended this college before? yes no If yes, last date attended _____

Educational Information

Do you have a high school diploma? yes no High School/GED graduation date _____
 If no, do you have a GED? yes no Are you currently in high school? yes no
 High school attended _____ City _____ State _____ Zip Code _____

Are you a high school student planning to take college courses under the Minnesota Post-Secondary Enrollment Options Program (PSEO)? (If yes, contact your high school counselor and the Admissions Office at SCC.) yes no

List all colleges attended

An official (sealed and unopened) college transcript of all colleges attended is required and must be submitted to SCC's Admissions Office. Students taking college level classes at their high school must list the college providing classes. SCC may be able to obtain your official transcripts from any of the Minnesota State System colleges or universities at no charge to you.

1) College/University/Institution _____ City _____
 State _____ Dates of Attendance _____ Degrees Earned _____
 2) College/University/Institution _____ City _____
 State _____ Dates of Attendance _____ Degrees Earned _____
 3) College/University/Institution _____ City _____
 State _____ Dates of Attendance _____ Degrees Earned _____

Request for Confidential Information

Providing the following information is voluntary. This information will assist the Minnesota State System in evaluating student recruitment and retention policies; it will not be used as a basis for admission.

Gender male female

Are you Hispanic or Latino? (A person of Cuban, Mexican, Chicano, Puerto Rican, South or Central American, or other Spanish culture, regardless of race) yes no

Race and ethnic background (Select any that apply)

- American Indian or Alaska Native (A person having origins in any of the original peoples of North, Central or South America and who maintains cultural identification through tribal affiliation or community attachment)
- Asian (A person having origins in any of the original peoples of the Far East, Southeast Asia or the Indian subcontinent)
- Black or African American (A person having origins in any of the black racial groups of Africa)
- Native Hawaiian or Other Pacific Islander (A person having origins in any of the original peoples of Hawaii, Guam, Samoa or other Pacific Islands)
- White (A person having origins in any of the original peoples of Europe, the Middle East or North Africa)

Are you now serving, or have you ever served, in the United States Armed Forces? yes no

What is the highest level of education for your parent(s)/guardian(s)?

Please respond for the parent(s), step-parent(s), adoptive parent(s) or guardian(s) who raised you. Check only one box for each parent/guardian.

Parent/Guardian #1

No high school diploma High school diploma Some college Two-year college degree/diploma Bachelor's degree or higher Not sure/don't know

Parent/Guardian #2

No high school diploma High school diploma Some college Two-year college degree/diploma Bachelor's degree or higher Not sure/don't know

Signature Required By Applicant

All of the information included is true and complete to the best of my knowledge.

Applicant's Signature _____ Date _____