

Application for Admission

Please print or type

Emp I.D. _____

Date Entered _____

Advisor _____

Legal Name _____
First Middle Last Preferred Name

Mailing Address _____

City County State Zip Code

Preferred Phone _____
 Cell Home Business Email Address _____
Cell phone number and/or email address is required.

Social Security Number _____ Date of Birth _____ Gender* Male Female
Month Day Year

Citizenship Status US Citizen Yes No

If not a US citizen are you a permanent resident alien of the US? Yes No Resident Alien Number _____
(attach a copy of front and back of green card)

*Primary Race/Ethnicity American Indian/Alaskan Native Asian Black/African-American
 Hispanic/Latino Not Specified Native Hawaiian/Other Pacific Islander White

Military Status Active Military National Guard Active Reservist Inactive Reservist
Will you be receiving veteran's benefits? Yes _____ No _____

Please list all the names that you have used on previous educational records. _____

Starting Term Summer Fall Spring _____ Year

(NOTE: If your starting enrollment term changes after you submit the application, please contact the Admissions Office.)

Home KCTCS Campus _____ Program of Study _____

Sub-plan (if applicable) _____

Admit Status

- First-Time College Student
 Readmit (attended KCTCS previously)
 High School (taking college courses prior to High School graduation)
 Visiting Student
Visiting students should submit letter of good standing from their college.
- Non-Degree
 First-Time Transfer (Are you eligible to return to your former college?) Yes No
Transcripts from all previously attended institutions are required before applicant can be admitted.

High School Attended _____
(If you earned a GED, enter GED for High School Name.) High School Name City State/County

High School Graduation Date _____ or GED Completion Date _____

Other postsecondary institutions attended and dates: (An official transcript from each institution listed is required for admission.)

| College | City | State | Dates Attended |
|---------|------|-------|----------------|
|---------|------|-------|----------------|

Residency Status Kentucky Non-Kentucky
Have you lived in Kentucky for the last 12 months? Yes No
Does either parent live in Kentucky? Yes No
How long have you been living in your non-Kentucky county? _____
Name of non-Kentucky county, if less than one year? _____

Unless otherwise indicated, all information on this form must be complete and accurate. Withholding or providing false information may make you ineligible for admission or enrollment. You will not be officially admitted to this college until all required credentials are received by this Admissions Office. If you do not enroll, application materials will be retained on file for one year.

Although there is not an application fee, upon signing this you acknowledge responsibility for all financial obligations you incur if you enroll as a student in the KCTCS, including any costs associated with the collection of your account.

Date _____ Signature _____

* Optional information requested for reporting purposes and will not be used in an admission decision.