

WEST VALLEY-MISSION COMMUNITY COLLEGE DISTRICT

CONCURRENT ENROLLMENT APPLICATION FOR ADMISSION

This application is for: West Valley College _____ Term: _____

summer	fall	winter	spring

FOR OFFICE USE ONLY	ID#	Res Code	Reg Date	Initials	Date
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PRINT CLEARLY

1. Legal Name (as it appears on your Social Security Card)

Last First Middle

2. Mailing Address

Number of PO Box Street Apt. No.

City State Zip

County Country

3. Phone Home () _____

Cell/Pager () _____

4. Social Security #

5. Birth Date _____ **Age** _____

Month Day Year

Place of Birth _____

State or Country

6. Are you Hispanic/Latino? Yes No

7. Predominant Ethnic Background _____

(Enter letters in box)

AC	Chinese	AN	Native American /Alaskan	PG	Guamanian
AI	Asian Indian	BL	African-American /Non-White	PH	Hawaiian
AJ	Japanese	FL	Filipino	PS	Samoan
AK	Korean	HM	Mexican American	PX	Other Pacific Islander
AL	Laotian	HR	Central American	WH	White
AM	Cambodian	HS	South American		
AV	Vietnamese	HX	Other Hispanic		
AX	Other Asian	ME	Middle Eastern		

8. Gender Male Female

9. (INT) e-mail address _____

10. Admit Status

- (1) First time college student
- (2) Previously attended another college
- (3) Returning transfer to West-Valley-Mission CCD
- (4) Returning to West Valley-Mission CCD
- (5) Continuing
- (6) Concurrent Enrollment

11. High School _____

12. Educational Goals

- A Transfer to a 4-year college with associate degree
- B Transfer to a 4-year college without associate degree
- C Associate degree without transfer
- D Associate degree, occupational major
- E Occupational certificate program
- F Formulate career interest
- G Prepare for a new career
- H Update job skills
- I Licensing requirements
- J Personal interest/educational development
- K Improve basic skills
- L Obtain High School diploma/GED
- M Undecided

13. Citizenship/Immigration Status

Are you a United States citizen? Yes No (1)

If NO, indicate your Immigration status by checking the appropriate box below and entering the date issued.

Permanent Resident – Alien # _____ (2)

Date Issued _____

Temporary Resident Date Issued _____ (3)

14. Residency Status

Have you lived in California for at least the last 2 years?

Yes No

If NO, date of entry _____ (check box below)

Foreign Country Resident Out-of-state Resident

15. Student Type

(Select the highest level of education you have completed and enter the appropriate number/letter in the box.)

- (8) Bachelor's Degree of higher
- (7) Associate Degree
- (6) Foreign High School Graduate
- (5) High School Proficiency Certificate
- (4) Received GED or CA Equivalency
- (3) Received High School Diploma
- (2) Currently Enrolled in Adult School
- (1) Concurrently Enrolled (Grade K-12)
- (N) Not Graduate/Not High School Enrolled

16. TO BE COMPLETED BY ALL STUDENTS

I DECLARE UNDER PENALTY OF PERJURY THAT THE STATEMENTS AND INFORMATION SUBMITTED ON THIS ADMISSION APPLICATION ARE TRUE AND CORRECT. I understand that all materials submitted by me for purposes of admission become the property of the West Valley-Mission Community College District. I also understand that falsification, withholding pertinent data or failure to report changes in residency or educational status may result in District action. Finally, in registering for future terms, I agree to provide true and correct information about any change in my educational status.

Student's Signature

Date