

# Application For Enrollment

## PERSONAL INFORMATION

Full Name \_\_\_\_\_ SS # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Date of Birth \_\_\_\_\_ E-mail \_\_\_\_\_

Telephone: Home \_\_\_\_\_ Cell \_\_\_\_\_

Street \_\_\_\_\_ Apt. \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

US Citizen?  Yes  No

Household Annual Gross Income \$ \_\_\_\_\_

Marital Status

Single  Divorced  Married Number of Dependents in Home \_\_\_\_\_

When you cut with scissors are you right handed \_\_\_\_\_ or left handed? \_\_\_\_\_

## EDUCATION

High School Graduate?  Yes  No Name of High School \_\_\_\_\_

Date Diploma Received \_\_\_\_ / \_\_\_\_ / \_\_\_\_ or Date GED Received \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Post-Secondary Education?  Yes  No

Name of School \_\_\_\_\_ Date Attended: \_\_\_\_\_

Name of School \_\_\_\_\_ Date Attended: \_\_\_\_\_

Name of School \_\_\_\_\_ Date Attended: \_\_\_\_\_

Degrees, Certificates Earned: \_\_\_\_\_

## BACKGROUND

Military Veteran:  Yes  No Handicaps or Special Needs: \_\_\_\_\_

Have You Ever Been Convicted of a Felony?  Yes  No

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you ever been convicted of possessing or selling illegal substances?  Yes  No

Are you interested in attending  Full Time (Days) or  Part Time (Evenings/Saturday)

Applicant Signature \_\_\_\_\_

Print Name \_\_\_\_\_

Date \_\_\_\_\_

Please provide the following documents:

- Copy of your High School Diploma or GED Certificate
- Proof of Citizenship (Valid Driver's License or Passport or Social Security Card)