# Application for Admissions 

Intended Term: $\square$ Fall $\square$ Winter $\square$ Spring $\square$ Summer Intended Year: 20

## Student Information

Social Security Number (optional): $\qquad$ $-$ $\qquad$ - $\qquad$ Date of Birth (Month/Day/Year) $\qquad$ 1 $\qquad$
Last Name $\qquad$ First Name $\qquad$ MI $\qquad$ Prior Last Name

## Preferred Name

$\qquad$ Home E-mail
Current Mailing Address ___C_County__ State___ Zip/Postal Code___

UCC may communicate with me by text message about my account, information relevant to the college admissions process, and my college experience. To opt out check this box:
Home Phone (___) $\qquad$ Cell Phone (___ ) $\qquad$

## General Information:

Gender (optional): $\square$ Male $\square$ female $\square$ Non-Binary $\square$ Other $\quad$ Will you be receiving Military Benefits? $\square$ Yes $\square$ No
Personal Pronoun (optional): $\square$ he/him/his $\square$ she/her/hers $\square$ they/them/theirs $\square$ Prefer not to indicate $\square$ Pronoun or Pronouns not listed
Ethnicity (optional): $\square$ Not Hispanic or Latino $\square$ Hispanic or Latino
Racial Heritage (Optional): $\square$ White $\square$ Black/African American $\square$ Hispanic $\square$ American Indian/Alaskan Native
$\square$ Asian $\square$ Pacific Islander/Native Hawaiian $\square$ Unknown/Non-responsive $\square$ Other

## Residency

$\square$ Permanent resident of Oregon, 90 days prior to first day of the term $\square$ Permanent resident of CA, ID, WA, NV, 90 days prior to first day of the term $\square$ Permanent resident outside of CA, ID, WA, NV $\square$ Other

## Previous Education Information

High School/GED completion: $\square$ HS Diploma $\square$ GED $\square$ Adult HS Diploma $\square$ In Progress Expected date of complettion $\qquad$ 1 $\qquad$ Date completed: $\qquad$ 1 1_ $\square$ Did Not Complete

High School/GED school attended or currently attending $\qquad$ City $\qquad$ State $\qquad$
List ALL colleges and universities attended. *Official college transcripts should be requested from each school and sent to Umpqua Community College.

| College/University Name | City and State | Dates Attended |
| :---: | :---: | :---: |
|  |  |  |
|  |  |  |

Enrollment Information Degree or Certificate seeking through UCC Major/Program (see back page) $\qquad$ or $\square$ Non-Degree $\square$ $\square$ Dual Credit (college credit while in high school)

## What is your goal at Umpqua Community College?

$\square$ 1. Earn Associates Degree
$\square$ 4. Transfer to University after earning Associates
$\square$ 2. Earn Certificate
$\square$ 5. Transfer to University with College credits but no degree
$\square$ 3. Job Preparation
$\square$ 6. Personal Enrichment
Signature $\qquad$ Date $\qquad$

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[^0]:    By signing this form, I certify the information is correct. I understand that if it is later found otherwise, it is sufficient cause for rejection or dismissal.
     solely for record-keeping, research, credit extension, and debt collection, with strict confidentiality assured.
    
    
    
     Department of Education Office, Seattle, Washington; or the Office of Federal Contract Compliance Programs, Department of Labor, San Francisco, California.

    UCC may automatically awards certificates upon completion of requirements. Details concerning requirements and opting out may be viewed under Graduation on the UCC website.

