

Rancho Santiago Community College District

OFFICE USE ONLY

Santa Ana College | Santiago Canyon College
ADMISSION APPLICATION

Colleague ID #: _____ Staff Initials: _____
Section #: _____ Date: _____

CHOOSE: Institution of Academic/Financial Record



Table with columns: Residency Status, SHAP, Student Type, SHAP. Lists various student categories like AB540 (Resident), CAPL, CAPU, etc.

Please use BLACK or BLUE ink only

Have you attended Santa Ana College, Santiago Canyon College or RSCCD Continuing Education before?..... Yes No
Have you been employed by RSCCD before?..... Yes No

1. USE LEGAL NAME ONLY

Last Name First Name Middle Name

2. PERMANENT ADDRESS (NO P.O. BOXES)

Number and Street / Apt # City State Zip

3. MAILING ADDRESS (Leave blank if same as permanent address)

Number and Street / Apt # City State Zip

4. PHONE NUMBER(S)

Daytime: _____
Evening: _____

5. SOCIAL SECURITY NUMBER & GENDER

_____-_____-_____-
Male Female

6. DATE OF BIRTH

____/____/____
AGE: _____

7. ETHNIC

- HIS - Hispanic
NHS - Non Hispanic/Latino
NOA - Not Answered

8. RACE(S)

(See Code Sheet) 1. _____ 3. _____
2. _____ 4. _____

9. E-MAIL

10. PREVIOUS NAME

Previous Last Name Previous First Name Previous Middle Name

11. FAMILY EDUCATION RIGHTS AND PRIVACY ACT

The College receives inquiries from a variety of persons and agencies requesting directory information. This includes name, city of residence, major, dates of attendance, degree and awards earned, the most recent previous educational institution attended by the student, participation in officially recognized college activities and sports, weight, height, and age. NOTE: Blocking this information may prevent a prospective employer from receiving your major and degree information.

I CONSENT TO RELEASE THIS DIRECTORY INFORMATION? Yes No

12. COUNTRY OF CITIZENSHIP:

Please complete the following (Immigration Status):

- 1 U.S. Citizen 5 Student Visa (F-1)
2 Permanent Resident 6 Other Status (Visa type _____)

3 Temporary Resident (Amnesty)

4 Refugee/Asylee

A#: _____

Date of visa/resident card issue: ____/____/____ Expiration date: ____/____/____
Mo. Date Year Mo. Date Year

SEVIS#: _____ FPER

Office Use Only: International Office Approval: _____



13. TERM APPLYING FOR

- Fall Intersession
Spring
Summer Year: 20_____

14. ACADEMIC PROGRAM

(See Code Sheet)
_____._____._____
(Application cannot be processed without Academic Program)

15. ADMIT STATUS

- 1 First Time Student
2 First-Time Transfer Student
3 Returning Student
4 Continuing Student
5 K-12
ENTER CODE

NAME

BIO

FINF

SHAP

STUDENT INFORMATION (Use Legal Name Only)

Last Name: _____ First Name: _____
 Date of Birth: _____ / _____ / _____

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Term: 20 _____
 Colleague ID: _____

16. EDUCATIONAL GOAL

- A BA/BS degree after AA/AS
- B BA/BS degree without AA
- C AA/AS w/o Transfer to 4yr
- D Vocational Dgr w/o Trnsfr
- E Vocational Certificate
- F Formulate Career Interest
- G Prepare for a New Career
- H Job Promotion
- I Maintain Cert or License
- J Educational Development
- K Improve Basic Skills
- L Obtain H.S. Diploma/GED
- M Undecided
- N Non-credit to Credit
- O 4 yr College Student taking courses to meet 4 yr Requirements

ENTER CODE

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RESIDENCY STATUS

17. MILITARY STATUS

- None apply to me
- Currently active military
- Dependent of currently active military
- Member discharged within last year
- Member discharged over a year ago (veteran)

Separation Date: ____/____/____ **MINF**

18. INTENDED LOAD

- Are you planning to accumulate 15 units or more? Yes No
- Are you planning to enroll in Math, English, or Reading class? Yes No

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- Matriculating
- Non-Matriculating

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STUDENT TYPE

19. HIGH SCHOOL LAST ATTENDED

Name of High School _____ County (if California) _____ State or Country (if NOT California) _____

Years Attended: _____ - _____ Year Graduated: _____

- UN Not HS Graduated or Student
- CAP Concurrently Enrolled
- A Adult School
- DP Received High School Diploma
- GD GED Equivalency
- PF Proficiency Exam
- FD Foreign Diploma

ENTER CODE

20. PRIOR COLLEGE(S) OF ATTENDANCE

Name of College	State or Country (if NOT CA)	Years Attended	Type of Degree Earned	Date Degree Completed (mm/yy)
		____ - ____		____ / ____ / ____ (mm/yy)
		____ - ____		____ / ____ / ____ (mm/yy)

21. WHEN DID YOUR PRESENT STAY IN CALIFORNIA BEGIN?

____ / ____ / ____
 Mo. Date Year

List the previous residence if current address is less than 2 years.

City	State	From: MM/DD/YY	To: MM/DD/YY

22. IN THE LAST 2 YEARS HAVE YOU...

(If under 19 and single, this information applies to your parents.)

1. Have you declared residency in another state for state income tax purposes? Yes No
2. Have you registered to vote in another state? Yes No
3. Have you declared residency at an out-of-state college or university? Yes No
4. Have you petitioned for a lawsuit or a divorce as a resident in another state? Yes No

23. TO BE COMPLETED BY STUDENTS UNDER 19 YEARS OF AGE

Legal Guardian and Relationship: Father Mother Other Name: _____

Is Guardian:

- U.S. Citizen
- Student Visa (F-1, J-1)
- Other Visa
- Permanent Resident
- Refugee, Asylee, or Parolee
- Other Status
- Amnesty

A#: _____

Issue Date: _____

Guardian's Present Residence: Issue Date: _____

Number and Street / Apt # _____

____ / ____ / ____ From: ____ Mo/Yr To: ____ Mo/Yr
 City State Zip

24. PARENT/GUARDIAN EDUCATIONAL LEVEL

Regardless of your age, please indicate the education levels of the parents and/or guardians who raised you:

- Parent or Guardian 1 (use codes 1-9)
- Parent or Guardian 2 (use codes 1-9)
- 1 Grade 9 or less
- 2 Some high school; did not graduate
- 3 High school graduate (diploma, GED, or equivalent)
- 4 Some college credit; no degree
- 5 Associate's degree (for example: AA, AS)
- 6 Bachelor's degree (for example: BA, BS)
- 7 Graduate degree (Master's, PhD, or professional degree beyond Bachelor's)
- 8 Unknown
- 9 No parent or guardian raised me / No second parent or guardian raised me

NONDISCRIMINATION POLICY

The Rancho Santiago Community College District complies with all Federal and state rules and regulations and does not discriminate on the basis of race, color, national origin, gender or disability. This holds true for all students who are interested in participating in educational programs and/or extracurricular school activities. Harassment of any employee/student with regard to race, color, national origin, gender or disability is strictly prohibited. Inquiries regarding compliance and/or grievance procedures may be directed to District's Title IX Officer/Section 504/ADA Coordinator, 2323 N. Broadway, Santa Ana, California, 714-480-7489.

TITLE IV

I understand that by completing this admissions application, that I hereby give the Rancho Santiago Community College District Financial Aid Offices permission to electronically add the institutional federal school code to my Free Application for Federal Student Aid (FAFSA) to match the home college as determined by admissions and records.

I certify that I have read the foregoing statements, that the statements made by me are true and complete to the best of my knowledge. I also understand that any falsification on my residence statement constitutes perjury and legal basis of dismissal.

Date _____ Signature _____