

Application for Admission to Community Education Noncredit Programs
CONTINUED

Application for new and returning students. Must include admission section. Answer all questions, printing legibly and using blue or black ink.

Last Names _____ First Name _____ Middle Name _____

COMMUNITY EDUCATION REGISTRATION – NONCREDIT CLASSES ONLY

COURSE RECORD NUMBER	COURSE NUMBER/PREFIX or COURSE TITLE	DAYS & TIMES	FEE (IF ANY)
7001	Intro to English A	M W	\$0.00

Nondiscrimination Statement: The Allan Hancock Joint Community College District ("District") is committed to equal opportunity in employment and all access to institutional programs and activities. The District, and each individual who represents the District, shall provide access to its employment opportunities, services, classes, and programs without regard to national origin, religion, age, sex or gender, gender identity, gender expression, race, color, medical condition, genetic information, ancestry, sexual orientation, marital status, physical or mental disability, or military and veteran status of any person, or because he or she is perceived to have one or more of the foregoing characteristics, or based on association with a person or group with one or more of these actual or perceived characteristics.

Before submitting the application, VERIFY that the information you have provided is complete and correct.
Once the application is submitted, changes may only be made if the student provides official documentation that supports the change.

THE STUDENT'S SIGNATURE IS MANDATORY. BY SIGNING, I DECLARE THAT: All of the information in this application pertains to me. All of the statements and information submitted in this admissions application are true. The information submitted by me for purposes of admission become the property of the College I am applying to.

Student's Signature (mandatory) _____
Date

Submit or US mail to:
Allan Hancock College
Community Education Building S
800 S. College Dr.
Santa Maria CA 93454

Or fax to:
(805) 352-1046

Method Of Payment (When Applicable):

- CHECK (Do not mail cash).
- CREDIT CARD (Select one): Visa MasterCard Discover American Express

If paying by credit card, all credit card information below MUST be completed.

Credit Card # _____ Exp. Date _____ Security Code _____

Print Name _____ Authorizing Signature _____

Credit Card Street Address (number only) and Zip Code _____

TOTAL FEES (if any) \$ 0.00

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Write full legal names.

Last Names _____ First Name _____ Middle Name _____

Other names used: _____ Date of Birth: _____
 MM DD YYYY

Gender: Male Female Decline to State

Current Mailing Address: _____
 Number and street, and unit number if applicable City State Zip

Phone Number: (_____) _____ Home Cell Alternate Number: (_____) _____

Personal Email Address: _____

Have you attended or participated in Hancock classes, whether on campus or at off-campus locations?

- Yes No

Proposed Noncredit Major or Course of Study (Choose ONE):

- | | | |
|--|---|---|
| <input type="checkbox"/> Advanced Noncredit ESL | <input type="checkbox"/> Family Childcare License Preparation | <input type="checkbox"/> Equivalency Exam Prep |
| <input type="checkbox"/> Basic Skills | <input type="checkbox"/> Floral Design | <input type="checkbox"/> Health & Safety |
| <input type="checkbox"/> Beginning Computer Skills | <input type="checkbox"/> Green Gardening and Landscaping | <input type="checkbox"/> Home Economics |
| <input type="checkbox"/> Beginning Noncredit ESL | <input type="checkbox"/> Income Tax Preparation | <input type="checkbox"/> Parent Education |
| <input type="checkbox"/> Career Preparation | <input type="checkbox"/> Intro to Early Childhood Studies | <input type="checkbox"/> Program for Adults with Disabilities |
| <input type="checkbox"/> Clothing Alterations Management | <input type="checkbox"/> Microsoft Office Basics | <input type="checkbox"/> Undeclared/Undecided |
| <input type="checkbox"/> Clothing Construction | <input type="checkbox"/> Secondary Ed/HS | |
| <input type="checkbox"/> Commercial Truck Driving | | |
| <input type="checkbox"/> Computer Applications | | |

Education Goal: I am attending Community Education to:

- | | |
|--|--|
| <input type="checkbox"/> (E) Earn a vocational certificate without transfer | <input type="checkbox"/> (J) Educational development |
| <input type="checkbox"/> (F) Discover/Formulate career interest, plans, or goals | <input type="checkbox"/> (K) Improve basic skills in English, reading, or math |
| <input type="checkbox"/> (G) Prepare for a new career (acquire job skills) | <input type="checkbox"/> (L) Complete credits for H.S. diploma or GED |
| <input type="checkbox"/> (H) Update job skills | <input type="checkbox"/> (M) Undecided |
| <input type="checkbox"/> (I) Licensing requirements (maintain license) | <input type="checkbox"/> (N) Move from noncredit courses to credit courses |

Per US Dept. of Education guidelines, colleges are required to collect the following racial and ethnic data.

What Is Your Race / Ethnicity? (Check One Or More):

- | | | |
|---|---|--|
| <input type="checkbox"/> Asian | <input type="checkbox"/> Hispanic/Latinx | <input type="checkbox"/> American Indian/Alaska Native |
| <input type="checkbox"/> Pacific Islander | <input type="checkbox"/> Black/African-American | <input type="checkbox"/> White, Non-Hispanic |

My Citizenship Status Is:

- U.S. Citizen Permanent Resident Temporary Resident/Amnesty Refugee/Asylee F-1 Student Visa
 M-1 Student Visa Visitor Visa (B1/B2) Other No documents

Education Level - The Highest Level Of Education I Have Completed Is:

- | | |
|--|--|
| <input type="checkbox"/> Not a high school graduate and not currently enrolled in high school. | <input type="checkbox"/> Foreign Secondary School Diploma/ Certificate of Graduation (HS or University) - (Year): _____ |
| <input type="checkbox"/> Student currently enrolled in high school. | <input type="checkbox"/> Received an Associate's Degree (U.S.) in (Year): _____ |
| <input type="checkbox"/> Earned U.S. High School diploma in (Year): _____ | <input type="checkbox"/> Bachelor's Degree or higher in (Year): _____ |
| <input type="checkbox"/> Passed U.S. GED/HS Equivalency in (Year): _____ | |

California Residency:

Have you lived in California continuously for the past two years?	<input type="checkbox"/> YES <input type="checkbox"/> NO
If you have not lived in California for the past two years, when did your present stay in California begin?	_____ MM / DD / YYYY
For how long have you lived continuously in California? _____ (enter year)	

Student's Military Service Status (Check One):

- I am not a member of the U.S. military I am a Veteran
 I am currently serving on Active Duty