

# SOUTHWEST VIRGINIA COMMUNITY COLLEGE



## APPLICATION FOR ADMISSION Non Credit

For Office Use Only

Empl. ID \_\_\_\_\_

IS OS \_\_\_\_\_

Staff Initial \_\_\_\_\_

Date \_\_\_\_\_

Revised 5-11-09/1-15-14

**Please Note:** In compliance with the Sex Offender and Crimes Against Minors Registry, a portion of this information will be submitted to the Virginia State Police.

1. Name: \_\_\_\_\_  
Prefix First Full Middle Last Suffix
2. Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
**See privacy statement, which can be obtained in the Admissions Office.**
3. Former name: \_\_\_\_\_
4. Date of birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(Month) (Day) (Year)
5. Which college/campus do you plan to attend? \_\_\_\_\_ College \_\_\_\_\_ Campus
6. In what type of class will you be enrolling? \_\_\_\_\_ Credit classes \_\_\_\_\_ Non-credit/CEU classes
7. What term do you plan to begin classes? 20\_\_ Term: \_\_\_ Fall (Aug-Dec) \_\_\_ Spring (Jan-May) \_\_\_ Summer (May-Aug)
8. Have you previously attended, applied for admission to, or been employed by any Virginia Community College?  
\_\_\_ No \_\_\_ Yes **If yes, SIS ID (Empl ID), if known:** \_\_\_\_\_
9. Primary Phone (include area code): (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_
10. Mailing address: \_\_\_\_\_  
(Street) (City) (State) (ZIP) (Country, if not USA)
11. Current Residence: \_\_\_\_\_ **Provide what you consider to be your location of residence. If you temporarily relocated to your current address to get an education, you should provide your previous location.**
12. Have you lived in Virginia for the last twelve months? \_\_\_ Yes \_\_\_ No-Where else did you live? \_\_\_\_\_ (US state or Foreign country).
13. Email address: \_\_\_\_\_ **This address will be your unofficial e-mail address; you will be assigned an official VCCS e-mail address after enrolling in a qualifying class.**
14. Emergency Contact Information: \_\_\_\_\_  
First Name Last Name Relationship Phone Number Extension
15. Employer (if employed): \_\_\_\_\_
16. Business phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ ext.: \_\_\_\_\_
17. Ethnicity: \_\_\_ White \_\_\_ Black/African American \_\_\_ Hispanic/Latino \_\_\_ Asian \_\_\_ American Indian/Alaska Native  
\_\_\_ Native Hawaiian/Other Pacific Islander
18. Gender: \_\_\_ Female \_\_\_ Male
19. U.S. Citizen Status: \_\_\_ Native \_\_\_ Naturalized \_\_\_ Alien Permanent \_\_\_ Alien Temporary \_\_\_ Not reported or Not living in the U.S.  
**Note: If you have been a U.S. Citizen since birth, choose Native. If you became a U.S. Citizen after birth, choose Naturalized. If you are not a U.S. Citizen, choose one of the types of alien statuses based on your visa. "Alien Permanent", "Alien Temporary" or "Not reported or Not living in the US" applicants must complete the remainder of the question on Citizen Status.**
- Country of Citizenship? \_\_\_\_\_ Permanent Status: \_\_\_ Resident Alien \_\_\_ Asylee \_\_\_ Refugee A#: \_\_\_\_\_
- Visa Type: \_\_\_\_\_ Visa Expiration Date: \_\_\_\_\_ If you chose "Not reported or Not living in the US," what Visa Status are you requesting? \_\_\_\_\_
20. Primary Language: \_\_\_\_\_ English \_\_\_\_\_ Other
21. Military status: \_\_\_ No Military Service \_\_\_ Spouse \_\_\_ Dependent \_\_\_ Active duty \_\_\_ Active reserves  
\_\_\_ Inactive reserves \_\_\_ Retired \_\_\_ Veteran/VA Ineligible \_\_\_ Veteran  
Branch: \_\_\_\_\_ Date of Entry \_\_\_\_\_  
mm/yy

Payment by Visa or MasterCard may be made on the Web when you register. From the navigation menu on left of web page select "For Student-Financial Services—Make a Payment." Web page appears showing balance due. Enter credit card and billing information, press "Submit Payment." A payment result page will appear showing if payment was authorized or declined. Print payment summary as your receipt. If pending message is received, you must contact the Business Office at 276-964-7215.

## Class Registration

<i>Class Number</i>	<i>Course Prefix</i>	<i>Course Number</i>	<i>Section</i>	<i>Cost</i>	<i>Start Date</i>	<i>End Date</i>	<i>Title</i>

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

Center for Community, Workforce & Economic Solutions  
 Southwest Virginia Community College  
 P.O. Box SVCC - Richlands, VA 24641  
 Phone: 276-964-7242 Fax: 276-964-7393  
 Para Informacion En Espanol, llame UD 276-964-7751

*For Office Use Only*

*Date Entry*

\_\_\_\_\_  
*Date    Initials*

Southwest Virginia Community College is an Equal Opportunity/Affirmative Action Employer