

APPLICATION FOR ADMISSION

SHADED AREA BELOW IS FOR OFFICE USE ONLY

Student ID Number	Residency/Fee Pay Status	Program Code	Intended Qtr	Date Received
Which quarter do you plan to begin? <input type="checkbox"/> Summer (Jun-Aug) <input type="checkbox"/> Winter (Jan-Mar) Year _____ <input type="checkbox"/> Fall (Sept-Dec) <input type="checkbox"/> Spring (Apr-Jun)			Have you ever applied for or attended classes offered by this college? <input type="checkbox"/> Yes <input type="checkbox"/> No	
*Social Security #: _____ - _____ - _____	Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male Providing this is voluntary.	Date of Birth: _____ / _____ / _____	In case of emergency contact: Name: _____ Telephone: () _____	

*To comply with federal law, we are required to ask for your Social Security Number (SSN) or Individual Taxpayer Identification Number (ITIN). We will use your SSN/ITIN to report Hope Scholarship/Life Time tax credit, to administer state/federal financial aid, to verify enrollment, degree and academic transcript records, and to conduct institutional research. If you do not submit your SSN/ITIN, you will not be denied access to the college; however, you may be subject to civil penalties (refer to IRS Treasury Regulation 1.6050S-1(e)(4) for more information). Pursuant to state and federal law the college will protect your SSN from unauthorized use and/or disclosure.

Legal Name (Last, First, Middle Initial)	Previous last name(s):
Mailing Address: Number & Street/ PO Box Apt No.	Day phone () _____ Evening phone () _____ Cell phone # () _____
City State Zip	E-mail Address

Former Foster Youth may qualify for educational benefits and support services. Please check here if you have been in Washington State foster care for at least one year since your 16th birthday.

Are you a U.S. CITIZEN? YES NO If not a U.S. citizen, country of citizenship _____
 If not a U.S. Citizen, what is your visa status? Attach a copy of your documentation.

- Permanent Resident (A# _____) Temporary Resident (A# _____)
 Refugee/Asylee (A# _____) Visitor
 International student with F, J, or M visa Other (explain) _____

NOTICE to applicants who are not citizens of the United States and do not have permanent resident immigration status: A state law makes certain students who are not permanent residents or citizens of the United States, eligible to pay resident tuition rates – when they attend public colleges/universities in this state. To qualify, students must complete an affidavit/declaration/certification if they have met one of the following conditions: (A) resided in WA state for three years immediately prior to receiving a high school diploma, and completed the full senior year at a WA high school, and continuously resided in the state since earning the high school diploma; or (B) completed the equivalent of a high school diploma, and resided in WA state for three years immediately prior to receiving the equivalent of the diploma, and continuously resided in the state since earning the equivalent of the diploma. If you meet one of these conditions, request an Affidavit/Declaration/Certification form from the Admission/Registration Office.

WASHINGTON STATE RESIDENCY STATUS

	YES	NO
1. Have you been a legal resident* of Washington and lived continuously in the state of Washington for the past twelve months? * A student cannot qualify as a legal resident of Washington for tuition calculation purposes if s/he possesses a valid out-of-state driver's license, vehicle registration, or other documents that give evidence of being a legal resident in another state. If no, how long have you lived continuously in the state of Washington? _____ months	<input type="checkbox"/>	<input type="checkbox"/>
2a. For the last calendar year, did your mother, father, or legal guardian claim you as a dependent on their federal income tax return?	<input type="checkbox"/>	<input type="checkbox"/>
2b. Will you be claimed as a dependent for the current calendar year?	<input type="checkbox"/>	<input type="checkbox"/>
3. If you answered "yes" to question 2a or 2b, has your mother, father, or legal guardian lived in the State of Washington continuously for the past twelve months?	<input type="checkbox"/>	<input type="checkbox"/>
4. Will non-federal agency/institution outside the state of Washington be providing financial assistance for you to attend college? (answer yes only if your eligibility for this assistance is based on being a resident of that state)	<input type="checkbox"/>	<input type="checkbox"/>
5. Are you on active military duty stationed in the state of Washington or a Washington National Guard member? (If yes, attach supporting documentation)	<input type="checkbox"/>	<input type="checkbox"/>
6. Are you the spouse or dependent of an active duty military person or a Washington National Guard member? (If yes, attach supporting documentation)	<input type="checkbox"/>	<input type="checkbox"/>

Please mark the box(es) to indicate what race you consider yourself: (response/non-response will not affect admission.)

- White (800) African American (872) American Indian (597) Alaska Native (015)
 Native Hawaiian (653) Vietnamese (619) Filipino (609) Chinese (605) Korean (612)
 Japanese (611) Other Asian (621) Other race (799) please specify _____

Are you of Spanish/Hispanic/Latino ethnicity?

- No Yes, Mexican, Mexican American, Chicano (722) Yes, Central American (704) Yes, South American (729)
 Yes, Other Spanish/Hispanic/Latino (717) please specify _____

PREVIOUS EDUCATION **HAVE OFFICIAL HIGH SCHOOL AND COLLEGE TRANSCRIPTS SENT TO WENATCHEE VALLEY COLLEGE**

Name of last high school attended		City and State		1. Date you graduated or will graduate Month ____ Yr ____	
				2. If you did not graduate, indicate the highest grade completed ____	
				3. Have you successfully completed the GED test? <input type="checkbox"/> Yes <input type="checkbox"/> No	
				If yes, what year? _____ Where? _____	
				4. Has either parent earned a Bachelor's degree? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Most recent college or vocational/technical school attended	City and state	Month ____ Year ____	Month ____ Year ____	Degree: <input type="checkbox"/> Yes <input type="checkbox"/> No	
		____ / ____ to ____ / ____			
Most recent college or vocational/technical school attended	City and state	Month ____ Year ____	Month ____ Year ____	Degree: <input type="checkbox"/> Yes <input type="checkbox"/> No	
		____ / ____ to ____ / ____			

PROGRAM OF STUDY/EDUCATIONAL INTENT: Please check the item that reflects your program goal or reason for attending WVC.

COLLEGE/ UNIVERSITY PROGRAMS

- Associate in Arts and Science (transfer degree)-007
 Associate in Science Transfer (Natural Sciences)-061
 Associate in Science Transfer (Physical Sciences)-062
 Associate in Business (transfer degree/major ready program)-011
 Associate in General Studies* (non-transfer degree)-008

NON-DEGREE SEEKING, JOB SKILL UPGRADE ENRICHMENT

(Students checking a box below may not be eligible for Financial Aid)

- I plan to upgrade my job skills.
 I plan to take classes for personal interest.
 I plan to take academic transfer courses (no degree).

PROFESSIONAL/TECHNICAL PROGRAMS

- Accounting* -505
 Automotive Technician* -712
 BCT- Accounting Clerk* -517
 BCT- Administrative Assistant* -551
 BCT- Certificate of Accomplishment* -559
 BCT- Computer Apps Specialist* -518
 BCT- Word Processing* -566
 Business* -502
 Business Computer Technology* -547
 Chemical Dependency Studies* -437
 Computer Technology & Systems (Networking)* -527
 Corrections*-838
 Criminal Justice*- 841
 Digital Design* -504
 Early Childhood Education* -402
 Environmental Systems & Refrigeration Tech* -703
 Farm Management* -106
 Hispanic Orchard Employee Education Adv* -135

- Hispanic Orchard Employee Education Beg* -118
 Industrial Technology- Aerospace Electronics* -780
 Industrial Technology-Drafting*-778
 Industrial Technology-Electronics*-657
 Industrial Technology-Machining *-808
 Industrial Technology-Welding*-814
 Integrated Pest Management*-108
 Introduction to Viticulture*-121
 Medical Assistant*-381
 Medical Laboratory Technology*-314
 Medical Office Specialist*-381
 Natural Resources*-165
 Nursing* (RN/LPN) -323
 Office Skills*-559
 Outdoor Recreational Management* -128
 Radiology Technology*-358
 Retail Management*-298
 Sustainable Agriculture and Resource Systems*-105
 Tribal Gaming Management*-241

* 2 year degree or certificate of completion – not intended for transfer

Applicant Signature _____ **Date** _____

Wenatchee Valley College does not discriminate on the basis of race, color, creed, religion, national origin, sex, sexual orientation, age, marital status, disability, or status as a disabled or Vietnam era veteran.

Mailing Addresses:

WENATCHEE CAMPUS:
 Wenatchee Valley College
 Admissions Office
 1300 Fifth Street
 Wenatchee, WA 98801

OMAK CAMPUS:
 Wenatchee Valley College
 Omak Campus
 P O Box 2058
 Omak, WA 98841-2058

Wenatchee Valley College charges a \$25.00 application fee. Please submit payment with your application. Applications submitted without payment will not be processed.

To charge payment, indicate: **Visa** ____ **MasterCard** ____ **Card #:** _____ **Expir. Date:** _____
Security Code: _____

 Cardholder's Name

 Cardholder's Signature

***As of fall 2015 WVC has implemented an application deadline. Applications submitted after the quarterly tuition due date will be admitted for the following quarter. Additionally, new students must complete the mandatory intake process before the tuition due date.**