Glendale Community College

Student Information Form

Hoop of Learning

6000 W. Olive Ave.
Glendale, AZ 85302
623.845.3333
623.845.3303 FAX

1. **PLANNED SEMESTER OF ENROLLMENT**
☐ Fall ☐ Spring ☐ Summer 1 ☐ Summer 2 Year: 20_____

☐ New student at this college
☐ Former student at this college. Last date attended: Month_____ Year _____

SOCIAL SECURITY NUMBER* ☐☐☐-☐☐-☐☐☐☐

SAIS NUMBER ☐☐☐☐☐☐☐☐☐☐

Arizona Department of Education (ADE) Student Accountability Information System (SAIS) number

2. LEGAL NAME
(Last, First, Middle)

3. FORMER NAME(S)

4. MAILING ADDRESS APT #

5. CITY, STATE 6. ZIP CODE

7. DAY PHONE ( ) EXT EVENING PHONE ( )

E-MAIL ADDRESS

RESIDENCY These questions are asked for the purpose of determining tuition and fees. State law now requires that a person who is not a citizen or legal resident of the United States or who is without lawful immigration status is not entitled to classification as an in-state student pursuant to A.R.S. Section 15-1802 or entitled to classification as a county resident pursuant to A.R.S. Section 15-1802.01. Failure to answer questions 8-10 may result in being classified as out-of-state for tuition and fee purposes. The responsibility of registering under the proper residency classification is placed upon the student. Any student who falsifies his/her residency shall be required to pay full tuition and may be subject to dismissal from the college and/or criminal action. Refer to the college catalog for residency guidelines.

8a. ☐ United States Citizen (1)
☐ Legal Immigrant/Permanent Resident (2) Date of Issue_____and
Expiration Date_____ and Alien Registration Number_____
☐ Lawful Refugee or Asylee (3) Date of Issue_____and
Expiration Date_____ and Alien Registration Number_____
☐ Legal Nonimmigrant (4-9):
- Specify visa or status_____and
- Date of Expiration of I-94_____and
- Alien Registration Number or I-94 Number_____

☐ Do Not Qualify for Any of the Above

8b. ☐ Country of Citizenship_____

8c. ☐ AZ Department of Motor Vehicle License or ID Number_____
Date of Issue_____ and Date of Expiration_____
☐ Do not possess an AZ Department of Motor Vehicle License or ID Number

9. Are you a dependent of a member of the U.S. **Armed Forces** stationed in Arizona pursuant to military orders? ☐ Yes ☐ No

10a. What date did your present stay in Arizona begin? _____
MONTH-DAY-YEAR

(If born in Arizona and haved lived here since birth, use date of birth, go to Section 10b.)

Are you a resident of Arizona? _____

What was your most recent state of residence **prior** to moving to Arizona?_____

10b. In what Arizona county do you reside? _____

If Maricopa, what date did you move to this county? _____
MONTH-DAY-YEAR

(If born in this county and have lived here since birth, use date of birth.)

What Arizona county did you reside in **prior** to moving to Maricopa?_____

11. **PREVIOUS EDUCATION**
☐ Attended another college/university: (G)

_____ _____ _____ _____
NAME OF INSTITUTION FROM TO CR HRS

12. **HIGH SCHOOL**
☐ Currently attending high school (B,D)

_____
NAME OF SCHOOL CITY STATE

When do you plan to graduate? Month _____ Year _____

13. **EDUCATIONAL GOALS**
What is your **primary** reason for attending this college?
☐ Prepare for employment (1)
☐ Learn new skills for a better job (7)
☐ For my personal interest or self-improvement (5)
☐ Transfer to another community college (6)

_____ _____
Name of Transfer Institution Name of Degree or Certificate

☐ Transfer to a University (2) (7152)

_____ _____
Name of Transfer Institution Name of Transfer Major
(Select from list # on reverse)

14. **BIRTHDATE** _____/_____/_____ _____
MONTH DAY YEAR AGE

15. **GENDER**** ☐ Male ☐ Female

16. **RACE/ETHNIC BACKGROUND****
☐ American Indian or Alaskan Native (1) ☐ Black (3) ☐ White (5)
☐ Asian or Pacific Islander (2) ☐ Hispanic (4) ☐ Other (6)

17. **INFORMATION RELEASE**: Do you give permission for the college to release directory information relative to your enrollment (as per the Family Education Rights and Privacy Act of 1974)? ☐ Yes ☐ No

18. What was the first language you spoke as a child? _____

What languages were spoken in your home when you were growing up?

_____

What language do you speak most often now?_____

Do you wish assistance with English fluency skills? ☐ Yes ☐ No

I certify that the answers on this Student Information Form are true, correct and complete.

_____ _____
Signature of Student Date

* The Social Security Number is generally used as the Student Identification Number. Students who choose not to disclose their Social Security Number will have a unique Student Identification Number assigned. Students should be aware that a correct Social Security Number must be on file for reporting information pertaining to potential tax credits, and must be used by applicants for federal and state aid. Failure to provide a correct Social Security Number may preclude the determination of eligibility for in-state residency, resulting in out-of-state tuition.

** Voluntary information used to comply with Federal Reporting and has no effect on admission to the college. This information will not be used for any discriminatory purpose.

To Be Completed by the Parent or Guardian:

I give permission for _____ to enroll as a student at Glendale Community College during the _____ semester, 20_____. I understand that he/she will be setablishing a college academic record and will be required to report such attendance to future colleges or universities and will be subject to all of the requirements, policies, and regulations in the Schedule of Classes and General College Catalog & Student Handbook.

_____ _____
Signature of Parent/Guardian **Date**

For Office Use Only: Pre-up_____ Input_____

04/19/07