Application for Admission

Northeastern Junior College
Admissions Office, 100 College Avenue
Sterling, CO 80751
Phone: 970-521-7000 · Fax: 970-521-6715

Please indicate the year and term you wish to enroll:

20 _____ Summer _____ Fall _____ Spring _____

Social Security Number* _____ Birth date: _____(MM/DD/YY)

**Your SSN is not required but is used to match past/future records, and is required for education tax credits and some financial aid.*

Last Name: _____ First Name: _____ Middle Name: _____

Previous Name (if applicable): _____

Local/Mailing Address

Street: _____ City: _____

County: _____ State: _____ Zip: _____ Country: _____ (if not U.S.)

Preferred Phone Number: _____ Personal email address**: _____

Permanent Address (If different from Local/Mailing Address)**

Street: _____ City: _____

County: _____ State: _____ Zip: _____ Country: _____ (if not U.S.)

Veteran/Military Service**
- ____ None
- ____ Veteran or Dependent
- ____ Active Duty Veteran
- ____ Active Duty Military

Branch of Service:

_____

Current Employment Status**
- ____ Full-time (30+ hrs/week)
- ____ Part-time (1-29 hrs/week)
- ____ Not employed

While at this College do you intend to: **
- ____ Earn an AA, AS, or AGS degree
- ____ Earn a technical degree (AAS)
- ____ Earn a certificate
- ____ Take a few courses then transfer to another college
- ____ Take a few courses for job or career reasons
- ____ Attend for personal interest
- ____ None of the above

Gender **
- ____ Male
- ____ Female

Do you consider yourself economically disadvantaged? ** Yes ____ No ____
Is English your second language? ** Yes ____ No ____
Do you consider yourself a displaced homemaker? ** Yes ____ No ____
Do you consider yourself a single parent? ** Yes ____ No ____
Are you a first generation college student? ** Yes ____ No ____
If no, which of your parents attended college? ** Mother ____ Father ____

What best describes your current status?
- New student, no college or university experience ____
- Transfer student, some college or university experience ____
- Readmit, I am returning to this college ____

WHAT IS YOUR INTENDED PROGRAM OF STUDY?

_____

If you are unsure of your program choice, choose *Associate of Arts* or *Associate of Science* if you ARE planning to transfer, or an *Associate of General Studies* or *Associate of Applied Science* if you are NOT planning to transfer.

Which best describes the level of education you have completed? **
- ____ Less than high school
- ____ High school graduate
- ____ Earned a GED
- ____ Certificate
- ____ Associates degree (AA, AS, AGS, AAS)
- ____ Bachelors degree
- ____ Masters degree
- ____ Doctorate (Ed.D., Ph.D.)
- ____ Professional degree (MD., JD, MBA)

High School/GED Information

High School Name: _____
City: _____
Currently enrolled in high school? Yes ____ No ____
If yes, expected graduation date: _____
If no, graduation date if applicable: _____

GED completed? Yes ____ No ____
If, yes date? _____
State completed: _____

Selective Service Statement

Colorado state law requires that all males who are at least *17 years & 9 months* of age but younger than *26 years* answer the following question:

Are you registered with the Selective Service?

Yes ____ No ____

You can register for selective service at www.sss.gov

Most Recent Prior College (If applicable)

Name of College:_____

City: _____ State: _____ Years of Attendance: _____

Citizenship

U.S Citizen ____ Non U.S. Citizen ____
Country of Origin _____
Visa Type: _____
Visa Expiration Date: _____-_____-_____ (MM-DD-YY)

Ethnicity (for federal reporting)**
- ____ Hispanic or Latino
- ____ Not Hispanic or Latino

Race (select one or more)**
- ____ American Indian or Alaskan Native
- ____ Asian
- ____ Black or African American
- ____ Native Hawaiian or Pacific Islander
- ____ White

**** Indicates optional questions.**

College Opportunity Fund (COF) provides a stipend to eligible undergraduate students. The stipend pays a portion of your total in-state tuition. You must apply online at www.CollegeinColorado.org in order to receive this stipend.

Residency Questions – Please answer the following questions. Failure to answer a question may result in your being misclassified for tuition purposes. Please contact the Office of Admissions if you need assistance.

Questions for Colorado high school students

For the last three years, were you enrolled in a Colorado high school? Yes _____ No _____
Did you or will you graduate from a Colorado high school before you enroll in College? Yes _____ No _____

Questions for GED recipients

Did you earn your GED in Colorado? Yes _____ No _____ If yes, have you resided in Colorado for the last three years? Yes _____ No _____

Additional Residency Questions – All Students

If you are under the age of 23 and not married please answer the questions for your parent or guardian. If you are over 23 or under 23 and have been married for at least a year please provide only your information.

What is your current age? _____

	Parent _____ **Guardian** _____	**Your information**
Dates of continuous physical presence in Colorado.	_____ (mm/yy) to _____ (mm/yy)	_____ (mm/yy) to _____ (mm/yy)
List any dates of extended absences from Colorado in the last two years.	_____ (mm/yy) to _____ (mm/yy)	_____ (mm/yy) to _____ (mm/yy)
List the last two years Colorado income taxes have been filed.	_____ (year) and _____ (year)	_____ (year) and _____ (year)
Current driver's license or identification card.	Date Issued: _____ New _____ Renewal _____ Number _____ State _____ Do not have license or ID card _____	Date Issued: _____ New _____ Renewal _____ Number _____ State _____ Do not have license or ID card _____
List the last two years of Colorado motor vehicle registration.	_____ (mm/yy) and _____ (mm/yy) Not applicable _____	_____ (mm/yy) and _____ (mm/yy) Not applicable _____
List the dates of employment in Colorado.	_____ (mm/yy) to _____ (mm/yy) Not applicable _____	_____ (mm/yy) to _____ (mm/yy) Not applicable _____
Date of Colorado voter registration.	_____ (mm/yy)	_____ (mm/yy)

If you are active duty military or a dependent of an active duty military service member assigned to a Permanent Change of Station in Colorado, you may be eligible for in-state tuition rates. Contact your military base Education Office for documentation.

I hereby certify that to the best of my knowledge the information furnished in this application is true and complete without the intent of evasion or misrepresentation. I understand that if the above information submitted is found to be false or misrepresented it is subject to penalty of perjury and is sufficient cause for tuition reclassification or dismissal.

_____ _____ _____
Applicant Signature Parent or Legal Guardian if Applicant is under 18 Date

Print Form

Institutions using this application form do not discriminate on the basis of race, color, national origin, gender, age, or disability in admission or access to its education programs or activities. Inquiries concerning Title VI, IX and Section 504 may be referred to the affirmative action officer of the institution to which you are applying.

For office use only: Student ID: _____Program of Study Code: _____