



ADMISSION FORM
HIGHLAND COMMUNITY COLLEGE

2998 West Pearl City Rd., Freeport, IL 61032
 Phone 815-235-6121 Fax 815-235-6130
 www.highland.edu

Applying for: Fall ____ Year ____
 Spring ____
 Summer ____

1. Social Security Number** _____ - _____ - _____

**[In order to apply for admission, we are requesting your Social Security Number pursuant to Public Law 93-579 (which refers to privacy of personal information) for the college's system of student records as well as for compliance with the federal and state reporting requirements. The Social Security Number is required if you are applying for financial aid.]

****Your complete LEGAL name must be supplied – please print legibly.****

2. Last Name _____ First _____ Middle (Required, if none, write N/A) _____

Preferred name (Nickname) _____

3. If you are a former student, what was the name (Maiden name) under which you last attended? _____

4. E-mail address _____ Type (Check one) Personal ____ Business ____ School ____

5. Mailing address (Street address first, then PO Box, if applicable) _____

6. City _____ 7. State _____ 8. Zip Code _____

9. County _____ 10. Home phone (include area code) () _____ - _____

11. Length of time at current address _____

12. Your place of employment _____

13. City _____ 14. State _____ 15. Zip Code _____

16. Number of hours employed each week _____ 17. Work Phone () _____ - _____

18. Male ____ Female ____ 19. Date of Birth (Month, Day, Year) _____

20. Are you a citizen or permanent resident of the United States? Yes ____ No ____

21. Are you Hispanic or Latino (OR Are you of Spanish Origin?) _____
 Yes Hispanic or Latino
 Not Hispanic or Latino

22. Are you from one or more of the following racial groups? (Select all that apply)
 American Indian or Alaska Native
 Asian
 Black or African American
 Native Hawaiian or Other Pacific Islander
 White
 Choose Not to Respond

____ Improve skills for my present job
 ____ Prepare for a future job immediately after attending the community college.
 ____ Prepare for the GED test or improve basic academic skills.
 ____ Personal interest/self development – not career oriented
 ____ Other

28. I plan on attending HCC (check one):
 Part-Time (less than 12 credit hours per semester)
 Full-Time (12 credit hours or more per semester)

23. Please identify your primary racial/ethnic group (Select One)
 American Indian or Alaska Native
 Asian
 Black or African American
 Hispanic or Latino
 Native Hawaiian or Other Pacific Islander
 White
 Choose Not to Respond

29. Enrollment Objective (check one):
 To complete one or two courses
 To complete a certificate
 To complete an Associate's Degree

24. Are you in the United State on a Visa -Nonresident Alien?
 Yes in the United States on a Visa.
 → Provide Home Country of Origin _____
 Not in the United States on a Visa

30. Educational level completed at time of admission (check one):
 GED
 High School
 Completed at least one or more courses in college
 Certificate
 Associate's Degree
 Bachelor's Degree
 Master's Degree
 First Professional Degree
 Doctorate Degree
 Other
 None

25. Admission Type (first time only):
 First time student in college-level coursework (New to higher education)
 Transfer student (from another college)
 Returning student
 New General Studies or Vocational Skills student

31. High School from which you graduated/will graduate _____
 City/State _____
 Year graduate (ed) _____ (Please send final official transcripts upon for HCC graduation Requirements)

26. Has either parent earned a Bachelor's Degree?
 Yes ____ No ____

27. While attending HCC, I plan to (check one):
 Prepare for transfer to a four-year college or university.
 If transfer, where? _____

32. If you are not a high school graduate, do you have a GED?
 Yes ____ No ____ Year completed _____ (Please send final official GED transcript for HCC graduation requirements)

