



Check the box in front of the college or skill center to identify where you plan to attend.

- Chandler-Gilbert Estrella Mountain GateWay Glendale Mesa Paradise Valley Phoenix Rio Salado
Scottsdale South Mountain Estrella Mountain - Southwest Skill Center GateWay - Central City/Deer Valley

APPLICANT INFORMATION

Student ID# Term of Enrollment: Fall Spring Summer Year

Legal Name First Middle Last

Date of Birth Sex Female Male Other MM/DD/YYYY

Gender Identity (optional) Man Woman Trans male/trans man Trans female/trans woman Genderqueer/Gender non-conforming
Other Identity Information provided regarding sex & gender identity will not be used for discriminatory purposes.

SSN# Your Social Security Number (SSN#) will not be used as your primary student identification number and will be kept confidential.

CONTACT INFORMATION

Address Apt#

City State Zip

Telephone Number Home Cellular

By checking this box, I give permission to the Maricopa Community Colleges to send SMS text messages and automated calls or other methods of communication by submitting this form.

Email Address Home Other

VERIFICATION OF LAWFUL PRESENCE FOR RESIDENCY/TUITION CLASSIFICATION*

* These questions are asked for the purpose of determining tuition. Pursuant to A.R.S. §§1-502, 15-1802, 15-1802.01, 15-1803, a person who is not lawfully present in the United States is not entitled to classification as an in-state/in-county student.

US Citizen AZ Department of Motor Vehicle License or AZ Photo ID Number:

Permanent Resident: Alien Registration#

Refugee or Asylee: Alien Registration#

Foreign Non-immigrant with Visa: Country of Citizenship Specify Visa type Alien Registration/I-94 Number

Lawful Presence Otherwise Documented: Specify document(s)

Does not Apply: I am not requesting in-state tuition (skip this section)

DEMOGRAPHIC INFORMATION

Table with 4 columns: Question, Primary Y/N, Percentage, Ethnic Group/Tribe. Rows include Hispanic/Latino, American Indian/Alaska Native, Asian, Black or African American, Native Hawaiian or other Pacific Islander, White.

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.

Information Release - FERPA

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

PREVIOUS EDUCATION

Previous College (check highest level completed)

- Associate Degree Bachelor Degree Master Degree No College or University Some College while enrolled in HS Some College no degree

High School Status (check one box) What will your high school completion status be when you begin attending this college?

- High School Diploma** High School Name _____ State _____ Completion Date _____
- GED Certificate** Completion Date _____ State _____
- Currently Enrolled** High School Name _____ State _____ Expected Completion Date _____
 Home Taught _____ Expected Completion Date _____
- No diploma or GED and under age 18** **No diploma or GED and over age 18**

FIRST GENERATION COLLEGE STUDENT

Have either of your parents completed a Bachelor's Degree? Yes No

LANGUAGE BACKGROUND

What was your first language? _____ What is your current primary language? _____

MILITARY

Are you a member of the US Armed Forces, a former member of the US Armed Forces, or a dependent of a member of the US Armed Forces?

If yes, select all that apply:

- I am a current member of the US Armed Forces Yes No
- I am a dependent of a member of the US Armed Forces Yes No
- I am a former member of the US Armed Forces Yes No

VEHICLE EMISSIONS AGREEMENT

In accordance with Arizona Statutes 15-1444 and 15-1449, I hereby certify that my vehicle as required by Arizona Revised Statute 49-542 has passed a vehicle emission test. I also understand that false certification of this affidavit constitutes a class 2 misdemeanor in Arizona.

If I fail to comply with the above, I understand that I am prohibited from parking on college property and my vehicle is subjected to removal at my expense.

- I acknowledge the above statement I do not park on campus

RESIDENCY

Final residency decisions for tuition purposes will be made in accordance with A.R.S. 15-1801 and regulations of the Maricopa Community College Governing Board.

Will you reside in Arizona at the time of attendance? Yes No If no, what state? _____

What date did your present stay in Arizona begin? Month _____ Day _____ Year _____

In what Arizona county do you reside? _____

If Maricopa, what date did you move to this county? Month _____ Day _____ Year _____

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

Are you seeking admission under special Admissions Programs (Western Undergraduate Exchange or Rio Military)? Yes No

If yes, in which state do you currently reside? _____

ACADEMIC PLAN

Select a primary reason for attending this college:

- Current high school student taking courses (dual or concurrent enrollment)
- Current university student taking courses to meet university requirements
- Earn a degree/certificate for transfer to another college or university
- Earn a degree/certificate to enter or advance in the job market

What academic plan do you intend to earn from this college?

- Personal interest
- Take courses for job skills
(do not intend to earn a degree/certificate)
- Take courses to transfer within Maricopa

Degree/Certificate Name: _____ Code: _____

FOI Name: _____ Full Time Part Time

I Plan to transfer to a University College Name: _____

I give the community college permission to award Associate's degree and/or certificates that I have earned, if appropriate, and notify me of the

REQUIREMENTS AND DISCLOSURES

- I acknowledge that I have read the Maricopa Tuition and Fees Policy and the Maricopa Refund Policy. I understand that I am responsible for all tuition and fees related to my enrollment in the Maricopa Community Colleges.
- If you are a student under the age of 18, additional permission will be required by a parent or guardian to enroll in courses, and accept responsibility for tuition and fees. Prior to enrollment in classes, please contact the Admissions, Records and Registration office at the institution you are interested in attending to provide the necessary consent.
- I swear under penalty of perjury that the document(s) I will submit to determine lawful presence in the United States are true and the information I provide on the form is true and complete.
- I certify that the answers on this application are true, correct, and complete.

Signature of Student

Date

ALL OF THE INFORMATION ON THIS FORM IS CONFIDENTIAL AND IN COMPLIANCE WITH THE FAMILY EDUCATION RIGHTS AND PRIVACY ACT OF 1974. THE ACT'S PROVISIONS ARE EXPLAINED IN THE GENERAL CATALOG.

For crime statistics reported under the Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act, please visit www.maricopa.edu/safety. Policies can be found online through www.maricopa.edu or you may request a copy from Admissions and Records.