

APPLICATION FOR ADMISSION

PLEASE TYPE OR PRINT CLEARLY

Term of Enrollment: Fall Spring Summer Year _____

PERSONAL INFORMATION

Full Legal Name: _____
Last First Middle

Previous Name(s): _____

Social Security Number: _____ Date of Birth: _____

We ask that you provide this number, which permits the College to distinguish between individuals of the same or similar names. This is important should you request a transcript at a later date or wish to be considered for financial aid. Social security numbers will be used for internal purposes only; they are not reprinted on transcripts or any type of academic record or document.

Permanent address: _____
Street

City State Zip Code

Telephone Number: _____ Cell Number: _____

Mailing address: _____
Street

City State Zip Code

Email address: _____

Marital Status: Single Married Widowed

Are you a Veteran? Yes No

Gender: Female Male

EDUCATIONAL INFORMATION

Have you previously attended Fort Peck Community College? Yes No

If yes, list date of attendance: _____

Program of Study: _____

High School Attended (indicate if GED/HiSet) Location Grad/Completion Date

Have either of your parents (or guardians) completed a bachelor's degree? Yes No Unsure

Transfer School Information

If you have attended or are attending a college or university, please provide the following information for each institution for each institution and whether or not credit was earned:

College Location Dates of Attendance Degree/Credits Earned

ETHNICITY INFORMATION

The following information is requested based on funding provided by the Tribally Controlled Community College Assistance Act of 1978

Enrolled member of a federally recognized tribe? No Yes If yes, include Tribal Verification Form

Hispanic/Latino Not Hispanic/Latino

If not Hispanic or Latino, indicate which one or more racial categories should be used to classify you:

American Indian/Alaska Native Asian/Pacific Islander

Black/African American Caucasian

RESIDENCY INFORMATION

Are you a US citizen? Yes No
Are you a resident of Montana? Yes No
Have you lived in Montana for the past 12 continuous months? Yes No
State in which you claim residency: _____
County in which you claim residence: _____
How long have you lived in this county? _____
Do you file Montana taxes? No Yes Year of most recent tax filing: _____
Do you have a MT Driver's License or State ID? No Yes Date of Issue: _____

SAFETY AND SECURITY INFORMATION

This section must be completed.

1. Have you ever been convicted of a felony (please include instances of deferred sentencing)?
 Yes No
2. Have you ever been subjected to court-ordered confinement for threatening or causing physical or emotional injury to persons or property? Yes No
3. Have you ever been disciplined, suspended from, or placed on probation at any educational institution for non-academic reasons? Yes No
4. Have you ever been required to register as a sexual or violent offender? Yes No

If you answered yes to any of the questions in this section, you must include an explanation with this application. An affirmative response to any of these questions will not automatically prevent admission. Any falsification or omission of data may result in a denial of admission or dismissal.

EMERGENCY CONTACT INFORMATION

Please list person who can legally sign for you in case of emergency.

Name: _____ Parent Spouse Other (list relationship): _____
Address: _____ City: _____ Zip: _____ Phone #: _____

DISABILITY

If you have a disability requiring accommodation that should be brought to the attention of the Fort Peck Community College, please submit a request for accommodation to Student Services. Documentation of disability may be required. All requests regarding disability will be confidential and will not be used as a factor in granting or denying admissions.

SIGNATURE - RELEASE OF INFORMATION

I hereby authorize the FPCC Registrar's Office to release any academic information (grades, degree & academic status) to a FPCC academic or financial program to which I become a participant; as determined by the programs eligibility requirements. I also grant permission to Fort Peck Community College the right to use, publish, display and/or reproduce any video/recorded voice or photographs for promotional publication and/or on the Fort Peck Community College website. I also understand that Fort Peck Community College will own the video/recorded voice/photographs and all rights to them. Please sign and date your application in ink, as without a signature and date your application cannot be processed.

I hereby certify that to the best of my knowledge the foregoing information is true and complete without evasion or misrepresentation. I understand that if it is later found otherwise, it is sufficient cause for rejection or dismissal. If my application for admission is approved, I agree to abide by the present and future rules and regulations, both academic and non-academic, and the scholastic standards of Fort Peck Community College, including, but not limited to, those rules, regulations, and standards stated in both the catalog and student handbook. I further acknowledge that if I fail to adhere to these regulations or meet these requirements, my registration may be cancelled.

Applicant's legal signature

Date

Application for Admissions (revised 6/16/15)

Original – Registrar's Office
Carbon – Financial Aid Office