

 <p>FOOTHILL-DE ANZA Community College District</p>	<h2 style="margin: 0;">APPLICATION FOR ADMISSION</h2> <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <div style="text-align: left;"> <input type="checkbox"/> Foothill College 12345 El Monte Rd. Los Altos Hills, CA 94022 (650) 949-7777 www.foothill.edu </div> <div style="text-align: left;"> <input type="checkbox"/> De Anza College 21250 Stevens Creek Blvd. Cupertino, CA 95014 (408) 864-5678 www.deanza.edu </div> </div> <p style="margin-top: 10px;">Fall <input type="checkbox"/> Winter <input type="checkbox"/> Spring <input type="checkbox"/> Summer <input type="checkbox"/> Year _____</p>	<p>For Office Use Only</p>
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IDENTIFICATION (GOAMTCH / SPAIDEN)

Last name _____ First name _____ Middle name _____

Address _____ City _____ State _____ Zip _____

Telephone _____ Gender: Male Female Date of Birth _____

*Social Security # (optional) _____ Email _____

(*By not supplying a SSN, you may not be eligible for certain tax credits/financial aid. Go to <http://www.foothill.edu/reg/ssn.php> for more information)

CITIZENSHIP: (SPAIDEN / GOAINTL)

<input type="checkbox"/> United States Citizen (1)	<input type="checkbox"/> Refugee/Asylee (4)	Visa # _____
<input type="checkbox"/> Permanent Resident Alien (2)	<input type="checkbox"/> Student Visa (F1, M1) (5)	Visa Date _____ Exp Date _____
<input type="checkbox"/> Temporary Resident (3)	<input type="checkbox"/> Other Status (6)	

ETHNICITY (SPAIDEN)

Are you Hispanic or Latino? (please circle)
yes no

If "yes", select all that applies:

<input type="checkbox"/> Mexican, Mexican American or Chicano (HM) <input type="checkbox"/> Central American (HR) <input type="checkbox"/> South American (HS) <input type="checkbox"/> Other Hispanic (HX)	<p>If "no, select one or more of the following:</p> <input type="checkbox"/> Asian Indian (AI) <input type="checkbox"/> Cambodian (AM) <input type="checkbox"/> Chinese (AC) <input type="checkbox"/> Filipino (F) <input type="checkbox"/> Japanese (AJ) <input type="checkbox"/> Korean (AK) <input type="checkbox"/> Laotian (AL) <input type="checkbox"/> Vietnamese (AV) <input type="checkbox"/> Other Asian (AX)	<input type="checkbox"/> American Indian (N) <input type="checkbox"/> Black or African American (B) <input type="checkbox"/> Guamanian (PG) <input type="checkbox"/> Hawaiian (PH) <input type="checkbox"/> Samoan (PS) <input type="checkbox"/> Other Pacific Islander (PX) <input type="checkbox"/> White or Caucasian (W) <input type="checkbox"/> Middle Eastern (WM) <input type="checkbox"/> Decline to State (XD) <input type="checkbox"/> Unknown/No Report (X)
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U.S. MILITARY STATUS: (if not in the military, skip this section) (SPAIDEN-Bio)

Discharge date _____ Home (city) of Record _____ Country of Record _____

Are you currently stationed in California? yes no If yes, is it for educational purposes only? yes no

<input type="checkbox"/> Current active military	<input type="checkbox"/> Member discharged within the last year
<input type="checkbox"/> Dependent of current active military	<input type="checkbox"/> Member discharged over a year ago

STUDENT TYPE: (SAAADMS)

First time attending any college (1)
 First-time at Foothill/De Anza, attended previous college (2)
 Returning student to Foothill/De Anza (4)
 Enrolling in high school and college together (Y)

Date your current stay in California began _____

Intended major/program of study _____
(SAAADMS)

If undecided/undeclared on major, check here:

For assistance in deciding a major or program of study, please call our counseling offices at 650-949-7423 (Foothill) or 408-864-5400 (De Anza)

Highest education level: (SOAHSCH-diploma)

- Not a graduate of, and no longer enrolled in high school (NA)
- Will be enrolled in high school & college at the same time (HS)
- Currently enrolled in adult school (AD)
- Received a high school diploma (ST)

- Received GED or high school cert of equivalency (GE)
- Received a cert of California High School proficiency (HP)
- Received a diploma/cert of grad. from a foreign school (FO)
- Received an Associate Degree
- Received a Bachelor Degree or higher

Year of completion of highest education level _____

EDUCATIONAL GOAL (select one): (SGASTDN-MISC)

- Obtain an associate degree and transfer to a 4-year institution (A)
- Transfer to a 4-year institution without an associate degree (B)
- Obtain a 2-year associate degree without transfer (C)
- Obtain a 2-year vocational degree without transfer (D)
- Earn a vocational certificate without transfer (E)
- Discover/Formulate career interest, plans, goals (F)
- Prepare for a new career (acquire job skills) (G)
- Advance in current job/career (update job skills) (H)
- Maintain certificate or license (I)
- Improve basic skills (K)
- Complete credits for high school diploma or GED (L)
- To move from non-credit coursework to credit (N)
- 4-year college student taking courses for college requirements (O)
- Undecided on goal (M)

HIGH SCHOOL INFORMATION: (SOAHSCH)

Name _____ City _____ State _____ Month/year completed _____

COLLEGE INFORMATION (if applicable): Begin with the last institution. You may list up to three colleges (SOAPCOL)

Educational level: No degree Associates degree Bachelor's degree/higher degree date (month/year) _____

Name _____ City _____ State _____ Degree _____ Date to/from _____

Name _____ City _____ State _____ Degree _____ Date to/from _____

Name _____ City _____ State _____ Degree _____ Date to/from _____

Please check any of the following that apply to you: (SGASADD)

- I would like information about money for college.
- I receive TANF, SSI, or General Assistance
- I am a former or current Foster Youth, and am interested in financial aid and/or other benefits and services available to Foster Youth.

By signing this application, I declare that:

- * All of the information in this application pertains to me.
- * Under penalty of perjury, the statements and information submitted in this online admission application are true and correct.
- * I understand that falsification, withholding pertinent data, or failure to report changes in residency may result in District action.
- * I understand that all materials and information submitted by me for purposes of admission become the property of the Foothill - De Anza Community College district.

By signing this application, I acknowledge understanding that:

- * Federal and state financial aid programs are available and may include aid in the form of grants, work-study, and/or any available student loans. I am aware that I may apply for assistance for up to the total cost of my education including enrollment fees, books & supplies, transportation, and room and board expense.
- * I may apply for financial assistance if I am enrolled in an eligible program of study (certificate, associate degree, or transfer), and may receive aid if qualified, regardless of whether I am enrolled full-time or part-time.
- * The application, financial aid program information and application assistance are available in the financial aid office at the college.

Signature _____ Date _____