

NOTE: YOU MUST COMPLETE ALL ITEMS ON BOTH SIDES OF THIS FORM FALL 20 SPRING 20 SUMMER 20

1 SOCIAL SECURITY/ I.D. NUMBER _____ Must Be Accurate	2 PLACE OF BIRTH _____ BIRTHDATE _____ State if U.S.A. or Country Month Date Year	3 GENDER <input type="checkbox"/> Male <input type="checkbox"/> Female
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4 LEGAL NAME
LAST NAME: _____ **FIRST NAME:** _____ **MIDDLE INITIAL:** _____
PREVIOUS NAME USED AT MPC: _____ **TELEPHONE #:** _____
 _____ PHONE NUMBER
MAILING ADDRESS OR P.O. BOX: _____
 _____ STREET CITY STATE ZIP CODE
E-MAIL ADDRESS: _____

5 CITIZENSHIP STATUS **U.S. CITIZEN:** YES
 If not a U.S. citizen, indicate status below: NO

(2) Permanent Resident Date Issued: _____
 (3) Temporary Resident Date Issued: _____
 (4) Amnesty
 (5) Refugee/Asylum (6) Student Visa (F-1 or M-1)
 (7) Other Status (Specify): _____

8 ENROLLMENT STATUS
 (Enter appropriate number in box) _____ →

(1) **NEW (K-12 student never attended college)**
 (2) **NEW TRANSFER** (attended college elsewhere)
 (3) **RETURNING TRANSFER** (attended MPC, then another college)
 (4) **RETURNING** (last college attended was MPC)
 Date of last attendance at MPC: **SEMESTER** _____ **Year** _____
 (5) **CONTINUING** (attended MPC last session/semester)

6 PRIMARY LANGUAGE
 Is **ENGLISH** your primary spoken language? YES
 NO

9 EDUCATIONAL STATUS
 (Enter appropriate number in box) _____ → **YEAR RECEIVED:** _____

NOT A HIGH SCHOOL GRADUATE:
 (1) Over 18 not a graduate of and no longer enrolled in high school
 (2) High School Enrichment student currently enrolled in grade K-12
 (3) Currently enrolled in Adult School

HIGH SCHOOL GRADUATE, NO COLLEGE DEGREE:
 (4) Received a U. S. High School Diploma
 (5) Received a GED or Certificate of Equivalency/Completion
 (6) Received Certificate of High School Proficiency exam
 (7) Foreign High School Diploma/Certificate

COLLEGE GRADUATE:
 (8) Received an Associate Degree
 (9) Received a Bachelor's Degree or higher

7 ETHNIC BACKGROUND (OPTIONAL)
 (Enter appropriate number in box) _____ →

(10) White Non-Hispanic	(42) Central American
(21) Chinese	(43) South American
(22) Japanese	(44) Other Hispanic
(23) Korean	(50) American Indian, Alaskan
(24) Laotian	(61) Guamanian
(25) Cambodian	(62) Hawaiian
(26) Vietnamese	(63) Samoan
(27) Indian Subcontinent	(64) Other Pacific Islander
(28) Other Asian	(70) Filipino
(30) Black Non-Hispanic	(80) Other Non-White
(41) Mexican	

10 EDUCATIONAL GOAL at MPC
 (Enter appropriate number in box) _____ →

(1) Personal Interest (not for employment)
 (2) Transfer to a four-year college with an Associate Degree
 (3) Transfer to a four-year college without an Associate Degree
 (4) Associate Degree, General Education
 (5) Associate Degree, Vocational
 (6) Vocational Certificate
 (7) Discover/formulate career interests, plans, goals
 (8) Job Skills - to prepare for a new job/career
 (9) Job Skills - to maintain or advance in current job/career
 (10) Maintain Certificate or license (e.g. Nursing, Real Estate)
 (11) Improve basic skills in English, reading, or math
 (12) Complete credits for high school diploma or GED
 (13) Undecided on goal

11 HIGH SCHOOL LAST ATTENDED (Check One)

<input type="checkbox"/> 273010 - Alisal	<input type="checkbox"/> 274405 - Notre Dame
<input type="checkbox"/> 273000 - Everett Alvarez	<input type="checkbox"/> 273365 - Pacific Grove
<input type="checkbox"/> 270000 - Año Nuevo	<input type="checkbox"/> 273365 - Pacific Grove Adult
<input type="checkbox"/> 273041 - Carmel	<input type="checkbox"/> 274413 - Palma
<input type="checkbox"/> 273035 - Carmel Adult	<input type="checkbox"/> 274575 - Robert Louis Stevenson
<input type="checkbox"/> 273001 - Carmel Valley	<input type="checkbox"/> 273455 - Salinas
<input type="checkbox"/> 270000 - Marina La Via	<input type="checkbox"/> 274493 - Santa Catalina
<input type="checkbox"/> 273280 - Monterey	<input type="checkbox"/> 273534 - Seaside
<input type="checkbox"/> 273250 - Monterey Adult	<input type="checkbox"/> 274750 - York
<input type="checkbox"/> 273317 - North Salinas	

Other High School: _____ **County:** _____
State (if U.S.A.): _____ **or Country:** _____
DATE OF GRADUATION OR LAST ATTENDANCE: Month: _____ Year: _____

12 COLLEGE MOST RECENTLY ATTENDED
 (to include MPC): _____
City/State: _____
Country: _____
Dates: From _____ to _____

13 MAJOR
 Program of study you intend to pursue at this college:

 (See Major Code Sheet)

14 INFORMATION RELEASE
 Can personal data and current enrollment info be released to transfer institutions without your written consent?
 YES NO

15 HOURS WORKED
 Estimate average number of hours per week you will work during your planned semester of enrollment: _____

16 VETERAN
 Check this box if you are a veteran of the U.S. Armed Forces:

STATEMENT OF LEGAL RESIDENCE

PART I - TO BE COMPLETED BY ALL STUDENTS

For education purposes, California residency depends not only on presence in California for one year immediately preceding the opening of the semester or session, but also on acting toward establishing residence and intending to make California the home for other than a temporary purpose.

The one-year residency period (proof required) which a student must meet to be classified as a resident does not begin to run until the student is both present in California and has manifested clear intent to become a California resident. The burden is on the student to demonstrate clearly both physical presence in California and intent to establish California residence.

When did your present stay in California begin? Month: _____ Date: _____ Year: _____

List states in which you lived for the last two years and the dates:

State: _____ From: _____ To: _____

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Did you file California State Income Tax? NO YES Last Tax Year: _____

Are you registered to vote? NO YES State: _____ Month/Date/Year registered: _____

In the last year, did you attend an out-of-state college as a resident? NO YES State attended: _____

In the last year, have you been the petitioner for a divorce in another state? NO YES State: _____

Do you have a driver's license? NO YES State: _____ Mo/Date/Yr Issued: _____

Do you have a California ID card? NO YES Mo/Date/Yr Issued: _____

Other proof of residency in California: _____

PART II - TO BE COMPLETED ABOUT YOUR PARENT(S) OR LEGAL GUARDIAN(S) IF YOU ARE UNMARRIED AND UNDER 19 YEARS OF AGE

I have lived continuously for the past two years with my parents(s) or legal guardian(s) and he/she/they have lived continuously for the past two years at a California address NO YES

If 'YES,' Check one: Both Parents Mother Father Legal Guardian(s) Relationship: _____

If 'NO,' give date that parent(s) or guardian(s) moved to CA: Month: _____ Year: _____

Did he/she file California State Income Tax? NO YES Most recent Tax Year: _____

Is he/she registered to vote? NO YES State: _____ Month/Date/Year: _____

Does he/she have a driver's license? NO YES State: _____ Month/Date/Year Issued: _____

Does he/she have a California ID card? NO YES Month/Date/Year Issued: _____

Other proof of residency in California: _____

PLEASE COMPLETE THE FOLLOWING ABOUT PARENT(S) OR LEGAL GUARDIAN(S):

Names(s) of parent(s) or legal guardian(s): _____

Address: _____ City: _____ State/Zip: _____

In case of emergency, please indicate a contact name and phone number(s):

Name: _____ Phone number(s): _____

PART III - TO BE COMPLETED BY ALL STUDENTS

Are you an active duty member of the U.S. military? NO YES / Branch of service: _____

Are you the spouse or dependent child of an active duty U.S. military person? NO YES / Branch of service: _____

If 'YES' to any of the above, what is the state of legal residence on military records? _____

If you are the dependent of an active duty member of the U.S. armed forces and wish to request exemption from nonresident tuition, you must complete the U.S. Military Dependent Resident Statement on the back of the Registration Form and obtain the required signature.

PART IV - TO BE SIGNED BY ALL STUDENTS

I declare under penalty of perjury that the statements submitted by me are true and correct. All materials submitted for admission become the property of Monterey Peninsula College.

STUDENT'S SIGNATURE: _____ **DATE:** _____