Form 020-006 Rev. 01/18





OFFICE USE ONLY

Expected Entry Date Admission Rep. Initial

Columbia College student education records are maintained in accordance with the Family Educational Rights and Privacy Act (FERPA) of 1974. Written student consent is required for access and release of information defined as educational records in federal and state law. A student's directory information (name, address, telephone number, date and place of birth, program of study, enrollment status, participation in officially recognized activities and sports, weight and height of members of athletic teams, dates of attendance, degrees and awards received, and most recent education institution attended) may be released upon request unless the Admissions and records office receives written notification that a student reserves the right to authorize in writing, on an individual request basis, the access and release of the directory information. Columbia College does not discriminate on the basis of race, color, religion, national origin, sex, age, or disability. The College complies with the Civil Rights Act of 1964, related executive orders 11246 and 11375, Title IX of the Education Amendments Act of 1972, Section 503 and 504 of the Rehabilitation Act of 1973, Section 402 of the Vietnam Era Veteran's Readjustment Assistance Act of 1974 and all Civil Rights Laws of the state of Virginia.

PERSONAL INFORMATION

Last (Family) Name	First Name			Middle Name	
Date of Birth (mm/dd/yyyy)	Social Security Num	ber		Gender	
/ /	-	-		Female Male	
Current Mailing Address					
Street				Email	
City	State	Zip	o Code	Contact Number	
				()) ~-	
Citizenship			Ethnic Origin		
U.S. Citizen Permanent Resident	Alien A#		African Am	erican	
□ Non-Resident Alien Visa Type:			Asian or Pacific Islander		
Country of Citizenship:				idian or Alaskan Native	
Diago of Dirth			□ Hispanic or	Latino	
Place of Birth:, City	Country		□ White, Non-	Hispanic	

ENROLLMENT PLAN

Program Start		☐ January ☐ July			□ Mar □ Sept		AprilOctober	MayNovember	JuneDecember
Р	Language Training	ESL Online ES		ine ESL	SL 🗆 TOEFL		□ Morning	Evening	U Weekend
R O G R A M S	Certificate Courses	 Dental Lab Techn Culinary Arts 	ology	Cosmetolo	0.	☐ Massag	10	lassage Therapy C.E.	
	Associate Degrees	 Dental Lab Technology Cosmetology Business Administration Computer Science 		Culinar	y Arts g English for Early (Childhood 🗖 Technic	al and Business English		

EDUCATIONAL HISTORY						
Primary Language:	English	□ Other:				
I have taken the following	examinations:	SAT ACT TOE	EFL 🔲 CaMLA (Cambridge Mich	iigan Language Assessments)		
High school Information:	High SchooHome SchooGED	ol (graduated or currently enrolle	ed)			
Name of High School		City, State / Country	, Dates Attended (mm/yyyy - mm/yy			
		ADMISSIONS INFO	ORMATION			
—		hours per week or 12+credits s than 12+credits per term)	per term) student.			
Do you plan to apply for	r federal studen	🗅 Yes 🗆 No	□ Yes □ No			
U.S. Military status: 🗆	No Military Se	rvice 🛛 Active-duty	□ Reserve / Natio	onal Guard		
	Veterans	□ Spouse / Depo	endent			
Do you plan to apply for	r Veterans Educ	cation benefits or Tuition Assisi	itant? 🗆 Yes 🗆 No			
I certify that all	entries on this ap	ted, signed, and submitted to the	by signing this form, I acknowledge e Admissions Office with application urate to the best of my knowledge. n dismissal from the college.	on fee.		
Signature:			Date:			