



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, that 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, Sections 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			Fir	First Name			Middle Na	Middle Name		
Date	of Birth (m	m/dd/yyyy)	Soc	cial Security N	umber		Gender	Gender		
/ /								Female	☐ Male	
Current Mailing Address (if different than pe Street				nanent address	s)		Email			
City Sta				ate Zip Code		Contact Number				
							()	-	
Citizenship Ethnic Origin										
□ U.S. Citizen □ Permanent Resident Alien A# □ Non-Resident Alien Visa Type: Country of Citizenship: Place of Birth: City Country Country				—	□ African American □ Asian or Pacific Islander □ American Indian or Alaskan Native □ Hispanic or Latino □ White, Non-Hispanic □ Other					
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Program Start		☐ January ☐ July	☐ February ☐ August	☐ Mare		☐ April☐ October☐	☐ May ☐ Nov		☐ June☐ December☐ December	
P R O G R A M S	Language Training	□ESL	□ Online ES			☐ Morning	□ Ever		□ Weekend	
	Certificate Courses	☐ Dental Lab T	echnology \(\sigma\) Co	osmetology	☐ Massag	ge Therapy	☐ Massage Ther	apy C.E.		
		☐ Culinary Arts ☐ Nurse Aide				☐ TESOL				
	Associate	☐ Dental Lab Technology ☐ Cosmetology		☐ Massage Therapy		☐ Culinary Arts		Arts		
	Degrees		Business Administration		☐ Teaching English for Early Childhood ☐ Technical and Business English					
	Bachelor's Degree	☐ Business Administration & Management			☐ Computer Science & Information Technology					

EDUCATIONAL HISTORY										
Primary Language:	English	:								
I have taken the following example:	I have taken the following examinations: SAT ACT TOEFL CaMLA (Cambridge Michigan Language Assessments)									
	High School (graduated) Home School GED	d or currently enrolled)								
Name of High School	pol	City, State / Country	Dates Attended (mm/yyyy - mm/yyyy)	Graduation Date						
ADMISSIONS INFORMATION										
I plan to enroll as a ☐ full-time (18+hours per week or 12+credits per term) student. ☐ part-time (less than 12+credits per term)										
Do you plan to apply for fed	leral student aid (FAF	□ Yes □ No	□ Yes □ No							
U.S. Military status: No	o Military Service	□ Active-duty	☐ Reserve / National Guar	rd						
□ Ve	eterans	☐ Spouse / Dependent								
Do you plan to apply for Vet	terans Education bene	fits or Tuition Assisitant?	□ Yes □ No							
I,, hereby state that by signing this form, I acknowledge and agree that this application must be completed, signed, and submitted to the Admissions Office with application fee. I certify that all entries on this application are complete and accurate to the best of my knowledge. I understand that falsifying any information on this application could result in dismissal from the college.										
Signature:			Date:							