Complete BOTH SIDES and return this application to: **Tallahassee Community College • 444 Appleyard Drive • Tallahassee, FL 32304 • (850) 201-8555**

PLEASE PRINT or TYPE

General Information

Social Security Number: .... Date of Birth: ....

Name: ....
Last Name   First Name   MI   Previous Name

Student Address: ....
Street Address/Box#   Apt. #

....
City   County   State   Zip Code

Permanent Address: ....
Street Address/Box#   Apt. #   City   State   Zip Code

E-mail: .... Student Telephone: (.............) ....

Work Telephone: (.............) .... Cell Phone (.............) ....

Emergency Contact: .... Relationship: ....
First Name   Last Name

....
Street Address/Box#   Apt. #   City   State   Zip Code

Home Telephone: (.............) .... Work Telephone: (.............) ....

Demographics

Gender: ❑ Female ❑ Male

Race: ❑ White ❑ Black ❑ American Indian ❑ Asian/Pacific Islander ❑ Hispanic ❑ other

Citizenship: ❑ U.S. Citizen ❑ Permanent resident alien (must submit copy of card) ❑ Other: .... ❑ Visa status ....

Place of Birth: City .... Country .... *Note:* Additional forms must be completed by international students.

If you and your family do not speak English at home, what language is spoken?: ....

Enrollment

I am applying for: ❑ Fall (August) .... (Yr.) ❑ Spring (January) .... (Yr.) ❑ Summer (May or June) .... (Yr.)

I am enrolling as a:
❑ First Time College Student ❑ Former TCC Student Returning ❑ GED Preparation Program Student
❑ Transfer Student (In-State) ❑ One term/Transient (Non-degree) Student ❑ ABE Program Student
❑ Transfer Student (Out-of-State) ❑ Early Admission/Dual Enrollment Student ❑ Workplace Literacy Program Student
❑ PSAV Students ❑ Other ....

Intended Program of Study (See program codes):
❑ Associate in Arts Program Code Number .... ❑ Certificate/PSAV Program Code Number ....
❑ Associate in Science Program Code Number .... ❑ Non-Degree Code Number ....

Education

I am eligible for admission to TCC because I have earned, or will earn prior to enrollment, the following:

❑ Standard High School Diploma. High School ....
Complete Name of School   City   State
❑ General Equivalency Diploma (G.E.D.)

High School or GED Diploma Earned/Anticipated: _____/_____/_____
Month   Day   Year

Prior College Attendance (*If none, check here* ❑). *Include all colleges, and have a transcript sent to TCC from each one.*
Name of College/University   Location   Attendance: From Mo/Yr   To Mo/Yr

....
....
....

Disciplinary History

If your answer to any of the following is yes, you must submit a full statement of relevant facts on a separate sheet attached to this form. You may be required to furnish the college with copies of all official documentation explaining the final disposition of the proceedings. *If your records have been expunged pursuant to applicable law, you are not required to answer yes to these questions. If unsure whether you should answer YES, we strongly suggest you answer yes and fully disclose all incidents. By doing so, you can avoid risk of disciplinary action or revocation of an offer of admission.*

a. ❑ Yes ❑ No. Have you ever been charged with or subject to disciplinary action for any type of misconduct at any educational institution?
b. ❑ Yes ❑ No. Have you ever been charged with a violation of the law which resulted in probation, community service, a jail sentence, or the revocation or suspension of your driver's license?

Signature: *I certify the information given in this application is complete and accurate. I understand that to make false or fraudulent statements within this application may result in disciplinary action, denial of admission, and invalidation of credits or degrees earned. I agree to have all transcripts and test scores released to TCC. I agree to abide by all rules and regulations of TCC. I will also allow use of electronic signature.*

Signature: .... Date: .... **Please Turn Over**

Information for Residency Classification

All applicants are required to sign the Affidavit of Residency below. If the applicant is less than 18 years of age and unmarried, the affidavit must be signed by a parent or guardian. Students who depend on out-of-state parents for support are presumed to be legal resident of the same state as their parents unless one parent has established legal residence in Florida for more than 12 months. Residence in Florida must be for the purpose of establishing a permanent home and not merely incident to enrollment at an institution of higher education. Documents supporting the establishment of legal residence must be dated, issued or filed 12 months before the first day of classes of the term for which a Florida resident classification is sought.

An unsigned statement automatically classifies students as out-of-state for tuition purposes. All supporting documents must be received to determine correct residency status.

(If you do not qualify simply sign the NON-FLORIDA RESIDENTS section below)

Florida Resident for Tuition Purposes Affidavit

- ❑ I am an *independent person* and have maintained legal residence in Florida for at least 12 months.
- ❑ I am a *dependent person* and my parent or legal guardian has maintained legal residence in Florida for at least 12 months.
- ❑ I am a *dependent person who has resided for five years* with an adult relative other than my parent or legal guardian and my relative has maintained legal residence in Florida for at least 12 months. (*Required: Copy of most recent tax return on which you were claimed as a dependent or other proof of dependency.*)
- ❑ I am *married to a person* who has maintained legal residence in Florida for at least 12 months (*Required: Copy of marriage certificate.*)
- ❑ I was *previously enrolled at a Florida state institution* and classified as a Florida resident for tuition purposes. I abandoned my Florida domicile *less than 12 months ago*, and am now re-establishing Florida legal residence. Name of Institution:_____
- ❑ According to the U.S. Immigration and Naturalization Service, I am a *permanent resident alien or other legal alien* granted indefinite stay. I have maintained domicile in Florida for at least 12 months. (*Required: INS documentation.*)
- ❑ I am a *member of the U.S. Armed Forces* and am stationed in Florida on active duty OR whose home of record is Florida or I am the member's dependent child or spouse. (*Required: Copy of military orders or Form DD2058 or DD214.*)
- ❑ I am a full-time instructional or administrative employee *employed by a Florida public school, community college, or institution of higher education*, or I am the employee's spouse or dependent child. (*Required: Copy of employment verification required.*)
- ❑ I am part of the *Latin American/Caribbean scholarship program*. (*Required: Copy of scholarship papers required.*)
- ❑ I am a *full-time employee of a state agency or political subdivision* of the state whose student fees are paid by the state agency or political subdivision for the purpose of job-related law enforcement or corrections training. (*Documentation required.*)
- ❑ I am a qualified beneficiary under the terms of the *Florida Pre-Paid Postsecondary Expense Program*. (*Required: Copy of card required.*)
- ❑ I am living on the Isthmus of Panama and have completed *12 consecutive months of college work at the F.S.U. Panama Canal Branch* or I am the student's spouse or dependent child. (*Required: Copy of F.S.U. transcript.*)

Attach copies of required documentation as indicated above. Someone other than the student (parent, spouse, or legal guardian) should complete this affidavit if the student is dependent or seeks to be classified as a Florida resident by virtue of a relationship. Otherwise, the student should complete this affidavit.

1. Name of Student .... 2. Student SSN: ....

   The CLAIMANT is the person who is claiming Florida residence [the student (if independent), parent, spouse, or legal guardian].
   All of the questions below pertain to the claimant.

3. Name of Claimant (if different from student) .... 4. Relationship of Claimant to Student: ....

5. Permanent legal address of claimant: ....

   Street Address

   ....
   City   State   Zip Code

6. Telephone Number of Claimant   (...................) ....

7. Date Claimant Began Establishing Legal Florida Residence: ....

8. Claimant's Voter Registration: State:............... County: .... Number: .... Original Issue Date:..............

9. Claimant's Driver's License: State:................Number: .... Original Issue Date: ....

10. Claimant's Vehicle Registration: State: .... License Tag Number: .... Issue Date:........................

11. Non-U.S. Citizen Only: Resident Alien Number: .... Date Card Issued: ....

I do hereby swear and affirm that the above named student meets all requirements indicated in the checked category above for classification as a Florida resident for tuition purposes. I understand that a false statement in this affidavit will subject me to penalties for making a false statement pursuant to 837.06, Florida Statutes.

....
Signature *in Ink* of Person Claiming Florida Residency   Date

PLEASE PRINT

Non-Florida Residents Only

I understand that I do not qualify as a Florida resident for tuition purposes for the term for which this application is submitted and that if I should qualify for some future term it will be necessary for me to file the required documentation prior to the beginning of the term in order to be considered for Florida residency classification.

....
State of Residence   Student Signature *in Ink*   Date

Program of Study

Write the appropriate program code as indicated on the Enrollment section of the application.

Associate in Arts Degrees

The AA programs are designed for students with career goals that require transfer to a four-year college or university after completion of their general education course work. **Most students select the General Transfer program.** Other programs allow students to acquire skills in specialized areas while leaving open the option of pursuing a four-year degree.

General Transfer... 1001	Engineering.. 1008
Architecture... 1012	Health Education 1009
Civil Engineering Technology 1014	Landscape Design.. 1019
Construction Engineering Tech 1015	Physical Education 1020
Electronic Engineering Technology 1016	Public Affairs 1010

Associate in Science Degrees

The AS and AAS programs are designed for students with career goals that lead to employment in specific fields after graduation. These programs do not include the full general education sequence necessary for transfer to a four-year college or university after graduation.

Biotechnology...	Dental Hygiene 2101	Multimedia Technology 2132
Business Administration:	Digital Media Broadcasting:	Networking Services Technology.....................2126
- Accounting, Budgeting, Finan. Services....... A107	- Broadcasting Track.........................2143	Nursing, R.N..2103
- Marketing Track A108	- Video Production Track 2142	Office Systems Technology...............................2107
- Management Track A109	Drafting and Design Technology:	Paralegal and Legal Studies............................2112
Business Management......................................2109	- CAD Specialization 2135	Radiologic Technology 2149
Civil Engineering Technology 2122	- GIS Specialization.........................2136	Recreation Technology 2124
Computer Prog. & Analysis................................2119	Early Childhood Development.........................2123	Respiratory Care...2106
Construction Engineering Technology	Electronics Engineering Technology	Technology Education:
- Building Construction Emphasis................ A110	- Computer Electronics A114	- Architecture.......................................2144
- Construction Management Emphasis....... A112	- Electronics A113	- Communications 2145
Criminal Justice Technology:	Emergency Med. Services (EMS).....................2104	- Computer /Networking Services..............2146
- AS to BS 2138	Graphic Design Technology.............................2125	- Construction.......................................2147
- Corrections Track..........................A104	Help Desk/Technical Support...........................2137	- GIS/Mapping.......................................2148
- Corrections Academy Track A105	Industrial Technology A115	
- Crime Scene Track.........................A111	Internet Services Technology...........................2128	
- Law Enforcement Track A103		
- Law Enforcement Academy Track A106		

Certificate Programs

The certificate programs are designed for students with career goals that require specific job entry skills in one of the areas listed below.

Computer Aided Drafting & Design Tech 6314	Law Enforcement and Corrections 5006
Computer Programming & Analysis 6302	Networking Services Technology........................ 6318
Crime Scene Investigation 6324	Office Systems Specialist,
Dental Assisting.. 5001	- General Office Option..................................... 6307
Emergency Medical Technology B312	- Info Processing Option 6321
Geographic Information Systems (GIS) Tech 6320	- Medical Transcripting Option 6322
Help Desk/Technical Support 6323	Paramedic 6309
Internet Services Technology 6317	Polysomnography Technology 4001

Post Secondary Adult Vocational Programs

PSAV programs are designed for students with career goals that require vocational training.

Basic Recruit Corrections Officer....................... 5005	Transportation Services Program 5010
Basic Recruit Law Enforcement 5006	Public Safety Telecommunications....................... 5011
Dental Assisting.. 5001	Correctional Probation Officer........................... 5012

Non-Degree Students

If you are not seeking a degree or certificate, but would like to register for one or more courses, select the appropriate code.

Do not have a degree... 3004
Transient 3001
Have a degree.. 3002

Checklist for New Students

- ❑ **Complete this Application for Admission**. Submit the completed application to the Enrollment Services Office. Admission deadlines by term are available online at *www.tcc.fl.edu*, in our current TCC Catalog, or Guide to Successful Advising and Registration.

  International students and those seeking admission to health-related associate in science programs must meet the specific published deadlines. Students seeking admission to postsecondary adult vocational certificate programs should review the program description for specific admissions information.

- ❑ **Request an official transcript of academic records** be mailed to the Enrollment Services Office. High school seniors must request their transcript be sent following graduation. GED recipients must request a copy of their test scores. Transfer students must request transcripts from all colleges and universities attended. Students seeking admission to Adult Education or to a postsecondary adult vocational certificate program that does not require a high school diploma or GED are exempt from this requirement.

- ❑ Students **born on or after 1/1/57 must provide documented proof of immunization** against German measles (rubella) and measles (rubeola-2 doses) to the Enrollment Services Office.

- ❑ **Take a placement test.** Students must take the College Placement Test (CPT) or present passing scores on the SAT or ACT. Placement scores are used during advising to place you into the appropriate courses. If you are using SAT or ACT scores for placement, visit Enrollment Services to verify that your scores are recorded on file at the College.

  Students seeking admission to Adult Education or a postsecondary adult vocational certificate program must take the Test of Adult Basic Education (TABE) or present evidence of allowable substitutes. Allowable substitutes are described in the catalog in the Admissions section. Review program descriptions to determine how and when to schedule to take the TABE. Non-degree seeing students and transfer students who present transcripts showing a grade of "C" or better in college-level English and/or mathematics are exempt from taking the CPT. *TCC Testing Center: 201-8282.*

- ❑ To **apply for financial aid**, complete and mail the Free Application for Federal Student Aid to the Federal Processing Center. Within four to six weeks you will receive a Student Aid Report (SAR). Submit all pages of the original SAR to the Financial Aid Office. *For more information, call (850) 201-8399.* Some postsecondary adult vocational certificate programs are not long enough to qualify students to receive financial aid. Review program descriptions for complete details.

- ❑ To **apply for veterans benefits** contact the VA Advisor by calling (850) 201-8406.

- ❑ Attend **Orientation/Advising**.

- ❑ To receive assistance from **Disability Support Services**, call (850) 201-8430 or (850) 201-8429 (TDD).

- ❑ **Register for classes**. To register online at EagleNet, visit www.tcc.fl.edu.

Tallahassee Community College Immunization Requirement

All applicants must complete Section I and the Physician or Public Health Official must complete Section II when required of student. *(See back of card)*

Section I

1. Name _____   Soc. Sec. No.: _____
          Last   *First*   *Middle Int.*

2. Mailing address _____

   _____   Home Tel: _____
     City   *State*   *Zip*   Work Tel: _____

3. Date of Birth _____
         Month   *Day*   *Year*

4. Indicate the term you plan to enter   ____ Fall   _____ Spring   ____ Summer   Year: _____

Transcript Request

Please send official transcript to:

Tallahassee Community College
Enrollment Services Office
444 Appleyard Drive
Tallahassee, Florida 32304-2895

Required Documents

Measles Immunization: All students born on or after 1/1/57 must provide documented proof of immunization against German measles (rubella) and measles (rubeola - 2 doses) to the Enrollment Services Office. All other students are exempt from TCC's immunization requirements. *Please fill out form below including physician's or authorized agent's signature.*

Academic Transcripts: The following students must provide official transcripts of their college, high school, or GED records.
1. *First-Time-In-College* *students* must provide a high school transcript or a copy of their GED test scores.
2. *Transfer students* must provide official transcripts from all colleges attended.
3. *Transient students* must provide a transient student letter from their home institution's Registrar's Office.
4. *Non-degree students* must provide a high school transcript, a copy of their GED test scores or a transcript from the last college attended, and complete a non-degree course form.

Associate in Science, Associate in Applied Science, Certificate and Post Secondary Adult Vocational Program Students: Students enrolling in these programs may be required to provide additional documentation.

Tallahassee Community College • 444 Appleyard Drive • Tallahassee, FL • 32304-2895

All students born on or after 1/1/57 must provide documented proof of immunization against (1) German measles (rubella) and (2) measles (rubeola) to the enrollment Services Office. All other students are exempt from TCC's immunization requirements.

1. Student's name _____   Date of Birth:_____
                    Last   First   Middle Int.

First Immunization   **Second Immunization**

Month   Day   Year   Vaccine   Month   Day   Year   Vaccine

_____   _____   _____   Measles (Rubeola)   _____   _____   _____   Measles (Rubeola)

_____   _____   _____   German Measles (Rubella)   _____   _____   _____   German Measles (Rubella)

Physician's Statement: I have reviewed the records and to the best of my knowledge this student has been adequately immunized against measles and rubella on the date(s) specified.

_____   _____   _____
          Physician or Authorized Signature   *Date*   *Physician/Public Health Clinic Name*

Transcript Request

Please send my official transcript to: Tallahassee Community College
                                                Enrollment Services Office
                                                444 Appleyard Drive
                                                Tallahassee, Florida 32304-2895

Student's name _____
                              Last   First   Middle Int.

Social Security Number _____

Date of last attendance_____

Signature: _____