APPLICATION FOR ADMISSION

Indicate the year and term you wish to attend: ☐ Fall ☐ Spring ☐ Summer 20

PERSONAL INFORMATION

Last Name: ___________________________ Gender: ☐ Female ☐ Male
First Name: ___________________________ Date of Birth: ___/___/____ (mm/dd/yy)
Middle Name: ________________________ Social Security Number: __________
Previous Name(s) (if applicable): ____________________________

PHYSICAL / MAILING ADDRESS

Street: __________________________ PO Box: __________
City: __________________________ County: __________ State: ______ Zip: ______
Phone: Mobile: ( ) Land Line: ( )
Personal Email Address: __________________________

ETHNICITY (Voluntary for State & Federal reporting) RACE (Voluntary for State & Federal reporting) Check all that apply

☐ Hispanic or Latino ☐ American Indian/Alaska Native ☐ Black/African American
☐ Not Hispanic or Latino ☐ Asian ☐ Native Hawaiian/Pacific Islander ☐ White

CITIZENSHIP (Select only one)

☐ U.S. Citizen (Y)
☐ U.S. Permanent Resident (must provide official documentation) (PR)
Wife Alien No. A________________________
☐ I have a Visa (must provide official documentation) (OT)
Type: ________________________ [e.g. F-1, B1/B2, J]
Exp. Date: ________________________
☐ I have refugee/asylum status (must provide official documentation) (OT)
☐ I am not a US citizen and have no lawful status with the US Citizenship & Immigration Service (NS)

(This information is NOT reported to USCIS)

HIGHEDUCATION LEVEL COMPLETED

☐ Did not graduate from High School (LHS)
☐ Currently in High School (C09-C12) Grade: __________
☐ High School Graduate (HS)
☐ Received GED (GED)
☐ Occupational Certificate (1)
☐ Associate Degree - Circle one: AA AS AAS AGS
☐ Bachelor's Degree (4)
☐ Masters or higher (5)

TERM OF ATTENDENCE / COURSE OF STUDY INFORMATION

While at Aims, which of the choices below will be your program of study? (Choose only one, please)

☐ AA: Associate of Arts, Liberal Arts (designed to transfer to a 4-year school)
Area of Study (optional): ☐ Anthropology ☐ Business ☐ Early Childhood Ed ☐ Economics
☐ Elementary Ed ☐ French ☐ History ☐ Math ☐ Political Science ☐ Psychology
☐ Sociology ☐ Spanish

☐ AS: Associate of Science, Liberal Arts (designed to transfer to a 4-year school)
Area of Study (optional): ☐ Psychology

☐ AAS: Associate of Applied Science
Specific major (required):

☐ Occupational Certificate
Specific major (required):

☐ Selective Admission Programs: If pursuing a program listed below, a separate application may be required
☐ Peace Officer Academy (PRECERTBP00)
☐ Nursing (PREAASN00)
☐ Radiological Technology (PREAASRT00)
☐ Surgical Tech (PREAASSIST02)
☐ Paramedic (CENTERM13)

If NOT declaring one of the above majors, please select one of the choices below

(Choose only one box, please)

☐ High School Concurrent Program Participant (HS)
☐ Will not graduate or transfer, but will take classes for personal interest only (NONE)
☐ Will transfer credit to another school but will NOT graduate from Aims (TR)
☐ Undecided or Unknown (00000)

FIRST GENERATION STUDENT

Has either of your parents earned a 4-year degree? (Yes or No) ☐ Yes ☐ No

MILITARY

Are you a Veteran? (Y)
☐ Yes ☐ No
Are you Active Duty Military? (A)
☐ Yes ☐ No
Are you a Military Dependent of either a veteran or active duty member? (D)
☐ Yes ☐ No

OFFICE USE ONLY

Aims ID:
LTA: __________________________ Prev App Dt: ________
Res Class: In-District (1) Out of District (2)
Out of State (3) Unknown (9)
Holds: “RH” “RD”
Lawful Per Selective Service
“RU” “RT” Under 16 yrs Citizen Undetermined
Date Received: ________ By: ________
Date Entered: ________ By: ________
HIGH SCHOOL / GED / COLLEGE INFORMATION

High School Name: ________________________________
City & State: ________________________________
SASID # (State-Assigned Student ID #): ________________________________
Graduation Date: ________________________________
Currently enrolled in high school?  ☐ Yes  ☐ No
Will you be taking Aims courses while still in high school?  ☐ Yes  ☐ No

If not a high school graduate, did you complete a GED?
☐ Yes  ☐ No
If yes, date completed: ________________________________
Prior College: (Name of most recent college attended):
______________________________

TUITION CLASSIFICATION

Failure to answer a question may result in your being misclassified for tuition purposes.

Are you claiming to be a Colorado Resident for tuition purposes?  ☐ YES  ☐ NO
If NO, what is your state of residence?
If you answered NO, you may skip this residency section.

What is your current age? ______ (If under 16, special permission is required. Please contact the Admissions Office)
• If you are under the age of 23 and not married, please answer the questions for your parent or guardian.
  If you are over 23, or under 23 and have been married for at least a year, please provide only your information. *NOTE* If you are 22 years old, use columns “A” and “B”.

<table>
<thead>
<tr>
<th>Column A - STUDENT</th>
<th>Column B - PARENT</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>If 23 Years Old or Older, Answer for: SELF</strong></td>
<td><strong>If Under 23 Years Old, Answer for:</strong></td>
</tr>
<tr>
<td>☐ If you are under 23 years old and married for at least 1 full year. Marriage Date: ________________________________</td>
<td>☐ Parent</td>
</tr>
<tr>
<td>☐ If you are under 23 years old but Emancipated from your parents (Attach Proof of Emancipation)</td>
<td>☐ Court-Appointed Legal Guardian</td>
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<td>Dates of continuous physical presence in Colorado to</td>
<td>Dates of continuous physical presence in Colorado to</td>
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<tr>
<td>Dates of any extended absence from Colorado in past 12 months (More than 1 month) to</td>
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<td>Month Year to Month Year</td>
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<td>Reason for absence:</td>
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<td>Dates of employment in Colorado or List other source of income if not employed</td>
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<tr>
<td>☐ Yes ☐ No</td>
<td>☐ Yes ☐ No</td>
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<tr>
<td>Last 3 years of Colorado Motor Vehicle Registration (Colorado License Plates/Tags Renewal)</td>
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<tr>
<td>☐ Yes ☐ No</td>
<td>☐ Yes ☐ No</td>
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STUDENT / PARENT SIGNATURES MUST BE SIGNED

I certify, under penalty of perjury, that the information I have provided on this form is true and complete without evasion or misrepresentation. I understand that if found otherwise, it is sufficient case for delay of admission, loss of credit, rejection, or dismissal. If asked by an authorized official, I agree to provide proof of the information I have provided.
I agree to abide by all policies, rules and regulations of the College regarding conduct and other obligations.

Student Signature ________________________________ Date ________________________________

If the student is under 18 years of age at the time this application is signed, the student’s parent or court-appointed guardian must also sign the application, certifying:
1. Aims Community College may assess, advise, and enroll my student, and may issue and permanently record earned grades,
2. Aims Community College may hold me liable for tuition, fees, and any other charges accrued by my student, and
3. Aims Community College may hold me responsible for my student’s behavior according to college code.
4. I understand that this consent is for the entire time that my minor child is enrolled. I understand it is up to me to affirmatively withdraw my consent if I wish to do so.

Parent Signature (for students under age 18) ________________________________ Date ________________________________
Print Name of Parent or Guardian signing ________________________________

(Revised 02/8/13)