A $15 non-refundable fee is charged upon registration.

<table>
<thead>
<tr>
<th>NAME</th>
<th>(Last)</th>
<th>(First)</th>
<th>(Middle)</th>
<th>(Maiden/Former)</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADDRESS</td>
<td>(Number &amp; Street)</td>
<td>(Apt. No.)</td>
<td>(City)</td>
<td>(State)</td>
</tr>
<tr>
<td>TELEPHONE</td>
<td>Home (MA):</td>
<td></td>
<td></td>
<td>Cell (BU):</td>
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<tr>
<td>GENDER</td>
<td>DATE OF BIRTH (mm/dd/yy)</td>
<td>SOCIAL SECURITY NUMBER</td>
<td></td>
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<td></td>
<td>Male</td>
<td>Female</td>
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</tbody>
</table>

ARE YOU A UNITED STATES CITIZEN:
- (Y) Yes
- (N) No - Resident Alien
- Permanant Resident Card Information: Date issued ________ Number__________
- A copy of the Permanent Resident Card is required as part of the Admissions criteria
- (N) No - Non-Resident Alien
- Visa Type__________________________

REQUIRED FOR FEDERAL REPORTING:
- ARE YOU HISPANIC OR LATINO:
  - (Y) Yes
  - (N) No

RACE/ETHNICITY (Please select one or more):
- American Indian or Alaskan Native (1)
- Asian (2)
- Black or African-American (3)
- Native Hawaiian or Pacific Islander (7)
- White (5)

MARITAL STATUS:
- (M) Married
- (S) Single

HIGH SCHOOL ATTENDED:
Name of School________________________________________
City____________________________________ State_________
HIGH SCHOOL GRADUATION DATE OR EXPECTED DATE OF GRADUATION: ________________
(Month/Year)

IF NOT A HIGH SCHOOL GRADUATE, HAVE YOU OBTAINED A GED?
- Yes ________________
- No (Month/Year)

PREVIOUS COLLEGE AND/OR TECHNICAL SCHOOL ATTENDED: (List most recent college and/or technical school attended first)
(Name)                (City/State)           (Date Degree Received)     (Degree Received)
_______________________________________________________________________________
_______________________________________________________________________________

ENTRY TERM/YEAR (Indicate One):
- Fall _________
- Spring _________
- Summer _________
(Year)  (Year)  (Year)

MAJOR FIELD OF STUDY (Program): Enter four-digit code
Select numeric code that best fits you area of interest from the Major Code.

Please complete the next page of this form.
## APPLICATION FORM

**Lakeland Community College, 7700 Clocktower Dr., Kirtland, OH 44094-5198**

### STUDENT TYPE:
- First Time College Student (N)
- Former PSEO/CCP Student Continuing at LCC (P)
- Tech Prep Student (T)
- Transfer from another College (X)
- Transient (transfer work back to home College) (Y)
- Ohio Resident 60 years or older (Z)

### COUNTY OF RESIDENCE

How long have you resided in this county? ________________________________ (years/months)

### HAVE YOU RESIDED IN OHIO THE LAST TWELVE MONTHS?
- Yes
- No

### I PLAN TO ENROLL:
- (F/T) Full Time (12 credit hrs. or more)
- (P/T) Part Time (Less than 12 hrs.)

### HIGHEST PREVIOUS EDUCATION LEVEL:
- Still in High School (1)
- Completed High School or GED (2)
- Delayed Out of High School (3)
- Some College (4)
- Associate Degree (5)
- Bachelor Degree (6)
- Post Bachelor Degree (7)

### EMPLOYMENT STATUS (Empl/Training Code):
- Full Time - NO Employer reimbursement (F1)
- Full Time - With Employer Reimbursement (F2)
- Part-time - NO Employer Reimbursement (P1)
- Part-time - With Employer Reimbursement (P2)
- Not Employed (N)

### EDUCATIONAL GOAL AT LAKELAND (check one):
- To obtain an associate degree for the job market (07)
- To obtain an associate degree then transfer to a four-year college or university at the Holden University Center (08)
- To obtain an associate degree then transfer to a four-year college or university (06)
- To obtain a certificate (05)
- To complete courses for transfer before completing a degree or certificate (04)
- To train for a new career by taking only selected courses (03)
- To upgrade skills for current job by taking only selected courses (02)
- To obtain knowledge for personal interest (01)

### HAVE YOU SERVED IN THE U.S. MILITARY OR ARE YOU CURRENTLY SERVING IN THE MILITARY?
- Yes
- No

If yes, check one or more of the following:
- Army
- Army Reserves
- Army National Guard
- Navy
- Navy Reserves
- Air National Guard
- Airforce
- Airforce Reserves
- Marine Corp
- Marine Corp Reserves
- Coast Guard
- Coast Guard Reserves

### HIGHEST SCHOOL YOUR FATHER COMPLETED:
- Middle School/Jr. High (FM)
- High School (FH)
- College or beyond (FC)
- Other/unknown (FO)

### HIGHEST SCHOOL YOUR MOTHER COMPLETED:
- Middle School/Jr. High (MM)
- High School (MH)
- College or beyond (MC)
- Other/unknown (MO)

### STATE STATUTE REQUIRES THAT ALL OHIO RESIDENT MALE STUDENTS COMPLETE THE FOLLOWING FORM. FAILURE TO DO SO MAY RESULT IN THE STUDENT BEING CHARGED OUT-OF-STATE TUITION RATE. (SSVE)

**Selective Service (To be completed by all males):**

Selective Service Number: ________________________________

Registration (mm/dd/yyyy) ________________________________

To register on-line or for on-line verification of registration: [www.sss.gov](http://www.sss.gov) Selective Service Office 1.888.655.1825

I certify that I am not required to be registered with Selective Service, and I qualify for exemption for the following reason: (check one box)

- I am with the armed forces of the United States excluding training in a reserve or national guard unit.
- I have not reached my 18th birthday.
- I am 26 years of age or older.
- I am a permanent resident of the Trust Territory of the Pacific Islands or the Northern Mariana Islands and I am not a citizen of the United States.
- I am a nonimmigrant resident of the United States in accordance with Section 101 (A)(15) of the “Immigration and Nationality Act” U.S. C. 1161, as amended.

I verify that the above information is true to the best of my knowledge.

Signature of Student ________________________________ Date ________________________________

All new full time students are also requested to submit official high school transcripts (and college transcripts, if applicable) to the Admissions Office at Lakeland.

It is the policy of Lakeland Community College that in its educational opportunities there shall be no discrimination against any person because of race, color, religion, sex, natural origin, handicap, ancestry, disabled veteran or Vietnam-era veteran status, age, marital and/or parental status.

Email Address ____________________________________________