

APPLICATION FOR ADMISSION

No Fee Required Please print legibly and complete all sections in dark blue/black ink Term: _____

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): _____

[While a SSN is not required for admission, it is used to match past/future records & is required for education tax credits & some financial aid.]

PHYSICAL / MAILING ADDRESS **SELECTIVE SERVICE**

Street: _____ PO Box: _____
 City: _____ County: _____ State: _____ Zip: _____
 Phone: Mobile: (____) _____ Land Line: (____) _____
 Personal Email Address: _____

All males between the ages of 17yrs 11mos and 26yrs must answer this question:

Are you registered with Selective Service? (For mor Information: www.sss.gov)
 Yes No

ETHNICITY (Voluntary for State & Federal reporting) **RACE** (Voluntary for State & Federal reporting)

<input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	<input type="checkbox"/> American Indian/Alaska Native <input type="checkbox"/> Black/African American <input type="checkbox"/> Asian <input type="checkbox"/> Native Hawaiian/Pacific Islander <input type="checkbox"/> White
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HIGH SCHOOL / GED / COLLEGE INFORMATION

High School Name: _____ If not a high school graduate, did you complete a GED? Yes No
 City & State: _____ If yes, date completed: _____
 SASID # (Student State ID #): _____ Did you earn a GED in Colorado? Yes No
 Currently enrolled in high school? Yes No If yes, have you resided in Colorado for the past three years? Yes No
 Graduation Date: _____
 Have you been enrolled in a CO high school for the past three years? _____
 Yes No Prior College: (Name of most recent college attended) _____
 City & State: _____
 Has either of your parents earned a 4-year degree? Yes No Will you be taking Aims courses while still in high school? Yes No
 Are you concerned about any of the following? (Check all that apply.) Choosing a career (3) Adequate financial resources (4) Child Care Availability (6)

TERM OF ATTENDENCE / COURSE OF STUDY INFORMATION **HIGHEST EDUCATION LEVEL COMPLETED**

Indicate the year and term you wish to enroll at Aims: Fall Spring Summer 20____

Home Campus: Greeley Loveland Fort Lupton

While at aims, which of the five choices below best describes your program of study? (Check only one box, please)

AA: Associate of Arts (transfer major).
 Area of Study (optional): Elementary Ed Business Early Childhood

AS: Associate of Science (transfer major)
 Area of Study (optional): Engineering

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

Occupational Certificate
 Specific major (required): _____

Selective Admission Programs:
 Please note that if pursuing one of the below, a separate application may be required:
 Peace Officer Academy (PRECERTBP00) Nursing (PREAASNU00)
 Radiological Technology (PREAASRT00) Surgical Tech (PREAASST02)
 Paramedic (PREAASEM05)

HIGHEST EDUCATION 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
 Bachelors Degree (4)
 Masters or higher (5)

OFFICE USE ONLY

Aims ID: _____
LTA: _____ **Prev App Dt:** _____
R - Ret **N- New**
Res Class: In-District (1) Out of District (2)
 Out of State (3) Unknown (0)
Holds: "RH" "RD"
 Lawful Pres Selective Service
 "RU" "RI"
 Under 16yrs Citizen Undetermined
Date Entered: _____ **By:** _____

If NOT declaring one of the above majors, please select one of the choices below (Check only one box, please)

Will transfer credit to another school but will NOT graduate from Aims (TR)
 Will not graduate or transfer, but will take classes for personal interest only (NONE)
 Undecided or Unknown (000000)

CITIZENSHIP (Select only one)	MILITARY INFORMATION
<input type="checkbox"/> U.S. Citizen (Y) <input type="checkbox"/> U.S. Permanent Resident (must provide official documentation) (PR) Resident Alien No. A- _____ <input type="checkbox"/> I have a Visa (must provide official documentation) (OT) Type: _____ [ex. F-1] Exp. Date: _____ <input type="checkbox"/> I have refugee/asylum status (must provide official documentation) (OT) <input type="checkbox"/> 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)	Were you in the armed services? <input type="checkbox"/> Yes <input type="checkbox"/> No Dates of Active Duty from _____ to _____ City/State entered Service _____ Were you Honorably Discharged? <input type="checkbox"/> Yes <input type="checkbox"/> No

RESIDENCY CLASSIFICATION

Residency Questions – Please answer the following questions. **Failure to answer a question may result in your being misclassified for tuition purposes.** Please contact the Office of Admissions if you need assistance.

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".**

	<u>Column A - STUDENT</u>	<u>Column B - PARENT</u>
	If 23 Years Old or Older, Answer for: SELF	If Under 23 Years Old, Answer for:
	<input type="checkbox"/> If you are under 23 years old and married for at least 1 full year. Marriage Date: _____ <input type="checkbox"/> If you are under 23 years old but <u>Emancipated</u> from your parents (Attach Proof of Emancipation)	<input type="checkbox"/> Parent Or <input type="checkbox"/> Court-Appointed Legal Guardian (Must provide proof of guardianship Please visit http://www.aims.edu/about/faq.php?d=16 for additional requirements)
Dates of continuous physical presence in Colorado	_____/_____/_____ to ____/____/_____ NA Month Day Year Month Day Year <input type="checkbox"/>	_____/_____/_____ to ____/____/_____ NA Month Day Year Month Day Year <input type="checkbox"/>
Dates of any extended absence from Colorado in past 12 months (More than 1 month)	_____/_____ to ____/_____ <input type="checkbox"/> Month Year Month Year	_____/_____ to ____/_____ <input type="checkbox"/> Month Year Month Year
Reason for absence:	_____	_____
Have you filed a :	<input type="checkbox"/> 2008 Colorado State Tax Return <input type="checkbox"/> <input type="checkbox"/> 2009 Colorado State Tax Return	<input type="checkbox"/> 2008 Colorado State Tax Return <input type="checkbox"/> <input type="checkbox"/> 2009 Colorado State Tax Return
Dates of employment in Colorado or List other source of income if not employed	<input type="checkbox"/> 2008 <input type="checkbox"/> 2009 <input type="checkbox"/> 2010 _____	<input type="checkbox"/> 2008 <input type="checkbox"/> 2009 <input type="checkbox"/> 2010 _____
Do you have a current Colorado issued driver's license or ID?	<input type="checkbox"/> Yes <input type="checkbox"/> No New <input type="checkbox"/> Renewal <input type="checkbox"/> DL# _____	<input type="checkbox"/> Yes <input type="checkbox"/> No New <input type="checkbox"/> Renewal <input type="checkbox"/> DL# _____
Last 3 years of Colorado Motor Vehicle Registration (Colorado License Plates/Tags Renewal)	<input type="checkbox"/> 2008 <input type="checkbox"/> 2009 <input type="checkbox"/> 2010 <input type="checkbox"/>	<input type="checkbox"/> 2008 <input type="checkbox"/> 2009 <input type="checkbox"/> 2010 <input type="checkbox"/>
Are you registered to vote in Colorado ?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

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 cause 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.

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