

APPLICATION FOR ADMISSION



bppcc.edu

U.S. SOCIAL SECURITY NUMBER

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APPLICATION DATE

PLANNED ENROLLMENT

Spring _____ Fall _____

Summer _____

For Office Use Only:

CWID _____

_____ First-time Freshman _____ Transfer Student _____ Returning Student _____ Visiting Student

LEGAL NAME

Last _____ First _____

Middle _____ Suffix _____

Prior/Maiden Name _____

MAILING ADDRESS

CITY, STATE ZIP

HOME PHONE _____ **WORK PHONE** _____ **CELL PHONE** _____

EMAIL ADDRESS _____ Personal Business Other

DATE OF BIRTH _____ **GENDER** MALE FEMALE

EMERGENCY CONTACT

MAILING ADDRESS

CITY, STATE ZIP

HOME PHONE _____ **WORK PHONE** _____ **CELL PHONE** _____

COUNTRY OF ORIGIN

Are you a citizen of the United States of America? Yes No If no, what is your country of origin? _____

If no, what is your current status in the United States? _____

Visa Type: Temporary Alien J-1 Other _____

RESIDENCY

Are you a resident of Louisiana? Yes No

If yes, how long? _____ Years _____ Months If no, what is your state of origin? _____

Are you a dependent of your parents? Yes No N/A

Do they presently live in Louisiana? Yes No

If yes, Parent's Name _____

Parent's Address _____

Are you a military veteran? Yes No

Are you active duty military? Yes No

Are you a dependent or spouse of a military veteran or active duty military? Yes No

Ethnic origin information is used for federal and state reporting ONLY. It is not used in consideration for admission purposes.

ETHNIC ORIGIN

American Indian or Alaska Native Native Hawaiian or Other Pacific Islander Hispanic/Latino

Asian White Not Hispanic or Latino

Black

MAJOR _____ **Concentration (if applicable)** _____

ACT/SAT SCORES

Have you taken the ACT/SAT? Yes (Submit test scores for placement purposes)
 No (See website for Placement Test dates and times)

HIGH SCHOOL DIPLOMA

What level of high school education have you earned? High School Diploma Certificate of Achievement (*HiSET/GED required*)
 High School Name _____ Graduation Date _____
 Address _____ City, State ZIP _____
 Have you earned a General Equivalency Diploma/GED/HiSET? Yes No If yes, date: _____

POST SECONDARY EDUCATION

Have you attended or enrolled in any proprietary school, college, university or technical college since leaving high school? Yes No
 List all institutions attended by name (proprietary school, colleges, universities, technical colleges).

Transcripts from colleges and universities (except vocational, technical, or proprietary schools) are required for analysis before admission can be completed. Official transcripts must be sent from the institution granting the credit directly to Bossier Parish Community College - Admissions/Registrar's Office. Please list additional institutions on another page and attach.

EDUCATION TO DATE

COLLEGE/UNIVERSITY	CITY & STATE	FROM: MM/YYYY	TO: MM/YYYY	HOURS EARNED	DEGREE/CREDENTIAL EARNED	LAST DATE OF ATTENDANCE

SUSPENSION

Have you ever been suspended/dismissed from a college/university for academic or discipline reasons? Yes No
 Are you currently on suspension from any college or university? (Failure to answer this question prohibits enrollment at BPC) Yes No

LEGAL CERTIFICATION

All of the above statements are true to the best of my knowledge, and all information furnished on this form is complete and accurate. I understand that withholding information or giving false information will make me ineligible for admission and enrollment at Bossier Parish Community College. I further understand that it is my responsibility to have all required records mailed directly to the Office of the Registrar from the respective high school or college(s) on or before the specified deadline listed in the current class schedule. I understand that my registration will be canceled and I will be dropped from the rolls of Bossier Parish Community College without appeal if my records do not meet requirements for admission. I further understand that readmission to the college will be denied and official transcripts will not be printed if my records are not filed in the office by this date. Should either situation occur and I am not accepted at Bossier Parish Community College, I understand NO REFUND OF FEES will be given. I do hereby authorize Louisiana public postsecondary education access to my academic records.

Signature: _____ Date: _____

STUDENTS WITH DISABILITIES

Students with disabilities should contact the **Disability Services (F-255)**, Phone: **(318) 678-6539**, as soon as possible after submitting their application. Arrangements must be made prior to registration.

Bossier Parish Community College is accredited by the Southern Association of Colleges and Schools Commission on Colleges to award the associate degree and certificate. Contact the Commission on Colleges at 1866 Southern Lane, Decatur, Georgia 30033-4097 or call 404-679-4500 for questions about the accreditation of Bossier Parish Community College. Bossier Parish Community College does not discriminate on the basis of race, color, national origin, gender, age, religion, qualified disability, marital status, veteran's status, or sexual orientation in admission to its programs, services, or activities, in access to them, in treatment of individuals, or in any aspect of its operations. Bossier Parish Community College does not discriminate in its hiring or employment practices. Coordinator for Section 504 and ADA: Angie Cao, Student and Disability Services Specialist - Disability Services, F254, 6220 East Texas Street, Bossier City, LA 71111 - (318) 678-6511 - acao@bpcc.edu. - 8:00 a.m.-4:30 p.m. M-F, excluding holidays and weekends. • Equity/Compliance Coordinator: Teri Bashara, Director of Human Resources - Human Resources Office, 6220 East Texas Street, Bossier City, LA 71111 - (318) 678-6056 - 8:00 a.m.-4:30 p.m. M-F, excluding holidays and weekends.