

APPLICATION FOR GENERAL ADMISSION



Students must provide a notarized copy of an unexpired driver's license or two forms of identification, one of which must be a photo ID. Please refer to additional guidelines at SUSCC.edu

PERSONAL INFORMATION

Social Security Number - Student Number

Date of Birth _____
Month/ Day/ Year

Full Legal Name _____
Last First Middle Other Last Name(s) on Former Transcript

Present Mailing Address _____

City _____ State _____ Zip _____ County _____

Home Phone (____) _____ Cell Phone (____) _____

SUSCC participates in the **Free Emergency Alert Notification Service**. This service sends messages to phone numbers and SU e-mails, notifying students of school closings and emergency situations. Please be aware that the numbers you provide in the above section will be used for this service.

Place of Birth _____
City State County

SUSCC Entry Status:

- Audit (non-credit)
- Accelerated high school student*
- Dual Enrolled high school student*
- High school graduate (attending college for the first time)
- GED graduate (attending college for the first time)
- Transfer (attended another college, including Post Graduate)
- Transient (attending another college)**

High school from which you graduated _____ Year you graduated (or will graduate) _____

City _____ State _____ County _____

Award: Standard Diploma Advanced Diploma GED year received _____ Other _____

* Accelerated/Dual Enrolled students must submit a current form, per semester, stating **specific courses** to be taken at SUSCC.
** Transient students must submit a current transient form, per semester, stating **specific courses** to be taken at SUSCC.

Citizenship: U.S. Citizen
 Permanent resident (non U.S. citizen), Country of citizenship _____
Must attach a copy of your permanent resident card.
 International student, Country of citizenship _____ Visa type _____
*Must attach a copy of your Visa. *F-1 visa holders must complete an International Packet.*

Campus you plan to attend: Wadley Opelika Valley

Residency: Please check the appropriate box:

I affirm that I am an Alabama resident for at least the previous twelve months.

I affirm that I am a resident of one of the following reciprocal Georgia counties for at least the previous twelve months.

Eligible Students under a reciprocal out-of-state tuition waiver agreement may attend designated campuses at the same rate as Alabama Students:

Eligible Counties for the Wadley Campus: Carroll, Chattahoochee, Coweta, Haralson, Harris, Heard, Marion, Meriwether, Troup

Eligible Counties for the Valley Campus: Muscogee, Pike, Stewart, Talbot, Taylor, Troup, Upson

Eligible Counties for the Opelika Campus: Chattahoochee, Harris, Heard, Marion, Meriwether, Muscogee, Quitman, Stewart, Talbot, Troup

I am not a legal resident of Alabama or one of the above mentioned Georgia counties.

Gender: Male Female

Ethnicity Origin: Hispanic or Latino Not Hispanic or Latino Decline

What is your race? (You may choose one or more of the listed categories.)

White Native Hawaiian or Other Pacific Islander American Indian/ Alaskan Native
 Black or African American Asian International (See International Student Under Citizenship)

Projected Term of Enrollment: Spring Summer Fall Year: _____

Are you currently enrolled at a college or university? Yes No

You must list ALL colleges attended since high school.

<u>Name of College</u>	<u>City and State</u>	<u>Dates Attended</u>	<u>Degree Earned</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(An applicant on academic suspension from another college is ineligible to attend Southern Union.)

Application for General Admission. NOTARIZED ID and

All official transcripts from your high school or any colleges/universities attended must be mailed to:

**Office of Admissions and Records
Southern Union State Community College
P.O. Box 1000
Wadley, Alabama 36276**

Selective Service

Male students who are United States Citizens or U.S. permanent residents between the ages of 18-25 are required to register with Selective Service. If this applies to you, have you registered with Selective Service?

(For more information see www.sss.gov).

Person to be contacted in case of an emergency: _____
Name Telephone Number

I understand that withholding information requested in this application or giving false information may make me ineligible for admission to, for continuation at, or for a tuition refund at Southern Union State Community College. With this in mind, I certify that all of this information is true, correct and complete. Further, if I am admitted to Southern Union State Community College, I agree to abide by the rules and regulations of the college. My permission is given to the college to obtain additional information pertinent to my academic record at other schools.

Signature _____ Date _____

Please attach Notarized Id to Application

Privacy Act

In accordance with the Family Educational Rights and Privacy Act of 1974, Southern Union State Community College considers the following information as Directory Information: "Student's name, address, telephone listing, date of birth, major field of study, participation in officially recognized activities and sports, weight and height of varsity athletes, dates of attendance, degrees and awards received and most previous educational agency or institution attended by the student."

If you do not want this information released, YOU MUST SIGN A REQUEST in the Admissions and Records Office no later than seven days after the formal registration period ends. In order to remove this hold, you must notify the Admissions and Records Office in writing.

It is the official policy of the Alabama State Board of Education and Southern Union State Community College that no person shall, on the grounds of race, color, disability, gender, religion, creed, national origin, marital status, or age, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program, activity, or employment. Persons requiring reasonable accommodations under the Americans with Disabilities Act (ADA) should contact the Southern Union State Community College ADA Coordinator at (334) 745-6437 extension 5351.

DO NOT FORGET TO ATTACH YOUR NOTARIZED ID