

NUNEZ COMMUNITY COLLEGE

Application for Admissions

3710 Paris Rd
Chalmette, LA 70043
504-278-6467

Term of Application: Fall Spring Summer 20_____

Last Name: _____ First Name: _____ Middle Name: _____

Other names you might have used: _____ Gender: _____

Social Security Number: _____ Date of Birth: _____

Mailing Address: _____

Is this your permanent address? Yes No How long have you lived continuously in LA? Years _____ Months _____

Home Phone: _____ Cell Phone: _____ E-mail Address: _____
Area code & phone number Area code & phone number

Whom to notify in case of emergency: _____
Last name, First Name Area code & phone number

ETHNICITY: What is your ethnicity? Hispanic or Latino Not Hispanic or Latino

RACE: What is your race? Mark one or more races to indicate what you consider yourself to be. This information is voluntary and the information will be used for federal and/or state law reporting purposes in a nondiscriminatory manner consistent with civil rights laws.

American Indian or Alaska Native Asian Black or African American
 Native Hawaiian or Other Pacific Islander White

Are you registered for Selective Service? Yes No No, because I am female **SS Number** _____

I am a veteran not a veteran

Are you a U.S. Citizen: <input type="checkbox"/> Yes <input type="checkbox"/> No		
If no, country of citizenship? _____	Type of VISA? <input type="checkbox"/> F1 <input type="checkbox"/> J1 <input type="checkbox"/> Other (Specify) _____	
Expiration Date _____	Alien Registration Number _____	Are you a refugee? <input type="checkbox"/> Yes <input type="checkbox"/> No

Are you employed? Yes No If yes, Are you employed Full time or Part Time?

ENTRANCE CLASSIFICATION:

Will you be a First time college student, not having attended any other college or university?
 Readmit college student, having attended Nunez Community College?
 Transfer college student, having attended another college or university?

EDUCATION PLAN:

Do you plan to work toward a degree or certificate at Nunez?

If Yes, please check the major(s) you will be pursuing: *These programs have limited enrollment. Specific permission to enroll is required.

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|--|--|--|
| <input type="checkbox"/> Biotechnology Laboratory Assistant | <input type="checkbox"/> General Studies | <input type="checkbox"/> Paralegal Studies |
| <input type="checkbox"/> Business Technology | <input type="checkbox"/> Heating, Ventilation, and Air Conditioning | <input type="checkbox"/> Paramedic |
| Specify Concentration Area: (Check One) | <input type="checkbox"/> Industrial Maintenance | <input type="checkbox"/> Petrochemical Maintenance |
| <input type="checkbox"/> Accounting <input type="checkbox"/> Administrative Professional | <input type="checkbox"/> Industrial Technology | <input type="checkbox"/> Practical Nursing* |
| <input type="checkbox"/> Managerial <input type="checkbox"/> Medical Office Management | Specify Concentration Area: | (**See options below for another college's nursing program.) |
| <input type="checkbox"/> Care and Development of Young Children | <input type="checkbox"/> General <input type="checkbox"/> INDT | <input type="checkbox"/> Tack Welding |
| <input type="checkbox"/> Computer Information Systems | <input type="checkbox"/> LA Transfer Degree (Arts) | <input type="checkbox"/> Teaching (Grades 1-5)* |
| <input type="checkbox"/> Construction Technology | <input type="checkbox"/> LA Transfer Degree (Sciences) | <input type="checkbox"/> Undecided |
| <input type="checkbox"/> Culinary Arts | <input type="checkbox"/> Medical Coding and Billing | |
| <input type="checkbox"/> Electrical Construction | <input type="checkbox"/> Metal Fabrication | |
| <input type="checkbox"/> Emergency Medical Technician* | <input type="checkbox"/> Nursing Assistant | |
| <input type="checkbox"/> Food Service Production Management | <input type="checkbox"/> Office Careers | |
| | Specify Concentration Area: (Check One) | |
| | <input type="checkbox"/> Accounting <input type="checkbox"/> General | |
| | <input type="checkbox"/> Legal <input type="checkbox"/> Medical | |

If No, what are your plans?

- I am a Not seeking a Degree or Certificate
- I am a Visiting Student for One Semester

<input type="checkbox"/> I am taking Nunez courses for transfer to the _____ degree program at _____ (name of college or university)
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- ** I am taking pre-requisites for an RN or other Allied Health Program
- I am a Cross-Enrolled Student from _____ (name of college or university)

HIGH SCHOOL INFORMATION: (Please check the appropriate option and complete the required information.)

I graduated from high school. List school attended, location and graduation year.

High School _____ City _____ State _____ Year Graduated _____

I received a Certificate of Completion. List school attended, location and completion year.

High School _____ City _____ State _____ Year Graduated _____

I received a GED. Date Completed: _____

I am still attending high school. I will graduate in _____ Do you have permission to enroll? Yes No

I am not a high school graduate. I completed the _____ grade.

Have you taken the ACT? Yes No If yes, when? _____

What is the highest level of education completed by either of your parents?

Less than high school High School graduate Some College College Graduate

COLLEGE EDUCATIONAL INFORMATION: List below *all* colleges you have attended even if you did not earn credit. Include Nunez Community College, St. Bernard Parish Community College and Elaine P. Nunez Technical Institute. Any student who does not list each previous institution attended is subject to dismissal without a refund. You must request official transcripts from all institutions attended.

Name of Institution	City, State, Country	Dates Attended	Credits Earned	Degree or Certificate Earned

Are you on suspension from any of the above institutions? Yes No

I do hereby authorize Louisiana public postsecondary education access to my academic record.

I certify that all information within this application is correct. I realize that false or incomplete information may result in dismissal from the college.

I understand that admission to the College does not constitute admission to every program offered by the College. I understand that different programs carry different admissions criteria.

I also certify that, in accordance with the requirements of the military Selective Service Act and the requirements of state law R.S. 17:1351, I have registered with the Selective Service. (Registration with the Selective Service must be completed before your Application for Admission can be completed.)

Signature of Applicant

Please copy your driver's license, state or Nunez ID here or attach a separate page.

Date

Payment Options (Please read carefully as these instructions have changed!)

- If paying in person, submit to the Bursar's Office, or
- Mail this completed form with a check or money order made payable to Nunez Community College, ATTN: Bursar's Office, or
- From the website, click on the link "**Credit Card Authorization Form**". Complete the form as instructed and fax the credit card authorization and this form to the Bursar's Office at 504-278-6402. A scan of the completed form may also be sent by email to sschwarz@nunez.edu.