

Mailing Address: _____
Street & Apt. # City State Country Postal/Zip Code

Permanent Address: _____
Street & Apt. # City State Country Postal/Zip Code

Telephone Numbers: Home () _____ Work () _____

Gender (optional): Male Female Date of Birth: ____/____/____

Citizenship (REQUIRED): Country of Birth _____ Country of Citizenship _____

I am a U.S. Citizen.

I am a Non-Citizen. My current status is: (check all that apply)

Resident Alien (presentation of card required)

In the country with a (presentation of current visa required): visitor visa student visa other _____

Person to contact in case of emergency:

Name: _____ Relationship to the applicant: _____

Address: _____ Telephone Number: (____) _____

EDUCATION INFORMATION:

I am a current high school / home school student at _____ and intend to graduate _____/_____.
circle one
month year

REQUIRED COURSE REGISTRATION (To be completed by the Guidance Counselor)

Students Current GPA (on a 4.0 scale) _____ Attendance during: Junior year Senior year (check all that apply)

Course requirements to be completed at MWCC: (Please check all that apply during all semesters at MWCC)

a. _____ English 1 or 2 course (circle)

b. _____ Laboratory Science 1 or 2 course (circle)

c. _____ U.S. History 1 or 2 course (circle)

d. _____ Physical Education 1 or 2 course (circle)

e. _____ Other History 1 or 2 course (circle)

f. Math (subject) _____

g. Other/Electives: _____

Student course requirement (per semester): _____ Total Credits (or) _____ Total courses

If a student places into fundamentals of English, reading, or mathematics, can these courses be used toward high school graduation? (Not applicable for Dual Enrollment applicants) Yes No

After 6:00 p.m. approval: Yes No (Letter of approval by parent/guardian must be provided to MWCC and high school.)

Web Approval: Yes No (Letter of approval by parent/guardian must be provided to MWCC and high school.)

Guidance Counselor Name (Print): _____

Title: _____ Phone #: _____

Fax #: _____ Email Address: _____

A student's application must have a guidance counselor signature. A signature attests to the accuracy of the information provided including courses selected above.

Guidance Counselor Signature: _____ Date: _____

SIGNATURES

Parent or Guardian: I hereby give my permission for my child to make application to Mount Wachusett Community College. I also give my child permission to enroll in the program should s/he be accepted. I understand that Mount Wachusett Community College can provide no greater security for high school students than for any other student. I also understand that my student's academic records will be released to his/her high school for inclusion in his/her school records.

Signature of parent or guardian: _____ Date: _____

Student: If accepted to Mount Wachusett Community College, I agree to accept the regulations and requirements of the college and will cooperate with the students, faculty, and administration in the maintenance of high standards and appropriate conduct. I also understand that my academic records will be released to my high school for inclusion in my school records. I CERTIFY THAT ALL INFORMATION STATED ON THIS APPLICATION IS ACCURATE AND COMPLETE. Concealment of facts or false statements may result in dismissal.

Signature of student: _____ Date: _____

Mount Wachusett Community College seeks to provide equal educational and employment opportunities and does not discriminate on the basis of race, color, religious creed, age, physical or mental disability, sex, national origin or ancestry, marital status, sexual orientation, genetic information, or veteran status. In compliance with the Clery Act (20 U.S.C. 1092(a) and (f)), all prospective students are entitled to review the MWCC Annual Security Report. This report may be accessed online at www.mwcc.mass.edu or by request through the Office of Admissions.