

Office Use Only

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PO Box 188  
 Kinston, NC 28502-0188  
 Telephone 252-527-6223  
 www.lenoircc.edu

Office Use Only

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### APPLICATION FOR ADMISSION

NOTICE TO STUDENT: The information that you provide below will be placed in our master file. If any of this data changes, please notify the Admissions Office immediately. Information on race and sex is requested for data gathering purposes only. Answer all questions completely and accurately. Incomplete forms may cause delay in your acceptance. **PLEASE PRINT OR TYPE.**

The college serves all applicants, students, or employees regardless of race, color, national origin, religion, sex, age, or disability. Persons with disabilities should contact the Student Services Department at 252-527-6223.

Name: \_\_\_\_\_

Last
First
Middle
Former

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Are you a North Carolina resident? \_\_\_\_\_ Drivers License State Issued: \_\_\_\_\_ Driver License # \_\_\_\_\_

County of Legal Residence: \_\_\_\_\_ State: \_\_\_\_\_ Country: \_\_\_\_\_

Cell Phone: ( ) \_\_\_\_\_ Home: ( ) \_\_\_\_\_ Business: ( ) \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Gender: \_\_\_\_\_ Male Birth Date: \_\_\_\_\_

\_\_\_\_\_ Female Age: \_\_\_\_\_

Ethnicity: \_\_\_\_\_ Race: Select one or more of the following racial categories

Are you Hispanic or Latino? \_\_\_\_\_ AN – American/Alaska Native \_\_\_\_\_ HP – Hawaiian/Pacific Islander  
 \_\_\_\_\_ YES ( HIS) \_\_\_\_\_ AS – Asian \_\_\_\_\_ WH – White  
 \_\_\_\_\_ No (NHS) \_\_\_\_\_ BL – Black or African American

Email Address information requested: \_\_\_\_\_

Semester to Enroll: \_\_\_\_\_ Fall \_\_\_\_\_ Spring \_\_\_\_\_ Summer \_\_\_\_\_ Year

Program Number Enrollment: _____ Freshman _____ Transfer _____ Returning	Program Name Long-Term Goal at LCC: _____ GR – Degree, Diploma, or Certificate _____ PE – Personal Enrichment
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U.S. Citizen: \_\_\_\_\_ Yes \_\_\_\_\_ No

If Not a U.S. Citizen, complete the following:

Country: \_\_\_\_\_

Resident Alien Card Number: \_\_\_\_\_ Issue Date: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Non Immigrant VISA Type: \_\_\_\_\_ Issue Date: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Are you Active Duty Military or a Military Dependent?

\_\_\_\_\_ Active Duty Military    \_\_\_\_\_ Military Dependent    \_\_\_\_\_ Neither    \_\_\_\_\_ Veteran (Y or N)

If you are active duty, where is your duty station? \_\_\_\_\_

If military dependent, where is your sponsor's duty station? \_\_\_\_\_

**RESIDENCY**

Have you lived in North Carolina continuously for the past 12 months? \_\_\_\_\_

I have lived in North Carolina since: \_\_\_\_\_

**EDUCATIONAL BACKGROUND**

Name of High School: \_\_\_\_\_ State: \_\_\_\_\_

\_\_\_ Yes, Graduated                      Graduation Date or expected date of graduation \_\_\_\_\_

\_\_\_ No, Did not Graduate                      Last Date of Attendance: \_\_\_\_\_

**If Did Not Graduate, Complete the Following:**

___ I received an Adult High School Diploma	School:	State:	City:	Date Received:
___ I received the GED	School:	State:	City:	Date Received:
___ I am currently enrolled in high school	School:	State:	City:	Expected Date of Graduation:

List **ALL** colleges attended after high school (**DO NOT INCLUDE CONTINUING EDUCATION**)

NAME	CITY	COUNTY	STATE	Dates of Attendance

Highest Grade Completed: \_\_\_ 8 \_\_\_ 9 \_\_\_ 10 \_\_\_ 11 \_\_\_ 12 \_\_\_ 13 (Adult High School)  
 \_\_\_ 14 (Post High School Vocational) \_\_\_ 15 (Associate Degree) \_\_\_ 16 (Bachelor's Degree)  
 \_\_\_ 17 (Master's Degree or higher) \_\_\_ -- (GED)

**ADDITIONAL INFORMATION**

Employment: R \_\_\_ 1 Retired    E2 \_\_\_ 5 Employed 11 - 20 hours per week  
 UN \_\_\_ 2 Unemployed – not seeking employment              E3 \_\_\_ 6 Employed 21 - 39 hours per week  
 US \_\_\_ 3 Unemployed – seeking employment                  E4 \_\_\_ 7 Employed 40 or more hours per  
 E1 \_\_\_ 4 Employed 1 – 10 hours per week    week

**IN CASE OF EMERGENCY, PLEASE NOTIFY**

NAME OF PERSON    ADDRESS    PHONE

I hereby certify that the information I have given is true to the best of my knowledge. I further understand that falsification or failure to supply the correct information may be considered grounds for rejection or dismissal.

\_\_\_\_\_ Date

\_\_\_\_\_ Applicant's Signature