

CHIPOLA COLLEGE

Application for Admission

Return to: Admissions & Records
 Chipola College
 3094 Indian Circle
 Marianna, FL 32446

Check Term and indicate Year you plan to enroll.

- Fall (August-December) Year _____
- Fall C (October-December) Year _____
- Spring (January-April) Year _____
- Spring C (March-May) Year _____
- Summer I (May-June) Year _____
- Summer II (June-August) Year _____

Please print in Blue or Black Ink

Social Security Number

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Please Select One:

- New Chipola College Student
- Returning Chipola College Student

Legal Name _____
Last First Middle Maiden

List all **previous** names under which documents may be sent _____

Permanent Mailing Address _____
PO Box/Street/Route Apt.# City County State Zip Code

Local Address, if different _____

Home Phone _____

Cell Phone _____

Work Phone _____

E-mail address _____

Emergency Contact _____

Relationship to Student _____

Home Telephone _____

Cell/Work Telephone _____

Date of Birth* ____/____/____

Place of Birth ____/____
City State

Country of Birth* _____

- Citizenship* United States
 Other Country _____
 Permanent Resident Alien
 Non-Resident Alien
 Visa Type _____

*(Passport, Visa and/or Alien Card Required at Admissions)
 Additional Forms must be completed by international students.*

- Gender*
 Male
 Female

- Ethnicity* Choose one:
 Hispanic/Latino
 Non-Hispanic/Latino

- Race* Choose one or more:
 American Indian/Alaskan Native
 Asian
 Natives Hawaiian/Other Pacific Islander
 Black/African American
 White

**Information is voluntary and will not be used discriminatively, but will aid the college in its commitment to equal education opportunity.*

Education Background

Date Received/Anticipated

State/County/Country

- Home Schooled (Notarized affidavit required) _____ / _____ / _____
- GED Diploma _____ / _____ / _____
- Standard High School Diploma _____ / _____ / _____
 Name of High School _____
- Special Diploma/Certificate of Completion _____ / _____ / _____
 Name of High School _____
- Did not complete High School or GED

Does your father/guardian have a Bachelor's degree or higher? Yes No Unknown

Does your mother/guardian have a Bachelor's degree or higher? Yes No Unknown

Are you a Veteran? Yes No

Discharge Date _____

Branch _____

Have you taken the SAT, ACT, or PERT test in the past two years? Yes No If yes, please have official scores sent to the Testing Center.

List the full names of ALL technical schools, colleges and universities previously attended, including Chipola College. **DO NOT USE ABBREVIATIONS.** Failure to list all institutions could result in your application being denied or your admission rescinded. *Use a separate sheet if necessary and attach to the application.*

STUDENT IS RESPONSIBLE FOR PROVIDING AN OFFICIAL TRANSCRIPT FROM ALL TECHNICAL SCHOOLS, COLLEGES, OR UNIVERSITIES ATTENDED.

NAME OF COLLEGE/UNIVERSITY (DO NOT USE ABBREVIATIONS)	CITY & STATE	DATES ATTENDED	HOURS OR DEGREE EARNED

I am enrolling as:

- First time in any college student
- Returning Student – Previously enrolled at Chipola;
Indicate last year of enrollment _____
- Transfer Student, planning to graduate from Chipola
- Transient Student/one term; not graduating from Chipola
- High School Early Admission/Dual Enrollment Student
- Educator Preparation Institute (EPI)
- Upper Level Special - Teacher Certification
- Non-degree seeking; enrolling in classes for personal reasons
- Non-degree – TCC Dental Hygiene Student

What do you plan to study? *Refer to Programs of Study/Academic Plans*

- Bachelor in Science (Requires supplemental application)
Program _____ Code # _____
- Associate in Arts
Program _____ Code # _____
- Associate in Science
Program _____ Code # _____
- College Credit Certificate
Program _____ Code # _____
- Workforce Development Certificate
Program _____ Code # _____

DISCIPLINARY HISTORY

Answer the next two questions, if your answer to any of the following is **yes**, you must **submit a full statement** of relevant facts by requesting a Disciplinary Disclosure Form from the Admissions Office. **Failure to answer the questions below will delay processing your application.** You may be required to furnish the college with copies of all official documentation explaining the final disposition of the proceedings. If your records have been expunged pursuant to applicable law, you are not required to answer yes to these questions. If you are unsure whether you should answer yes to #1 or #2, we strongly suggest that you answer yes and fully disclose all incidents. By doing so, you can avoid any risk of disciplinary action or revocation of an offer of admission.

#1 Yes No Are you currently or have you ever been, charged with or subject to disciplinary action for scholastic or any other type of misconduct at any educational institution? (if Yes, you must submit a full statement of relevant facts by requesting a Disciplinary Disclosure Form from the Admissions Office.)

#2 Yes No Have you ever been charged with a violation of the law which resulted in, or, if still pending, could result in probation, community service, a jail sentence, the revocation or suspension of your driver's license (including traffic violations which resulted in a fine of \$200 or more)? (If Yes, you must submit a full statement of relevant facts by requesting a Disciplinary Disclosure Form from the Admissions Office.)

VERIFICATION STATEMENT

In compliance with Florida Statute 119.071(5), the college collects your Social Security Number for use in the performance of the College's duties and responsibilities. Federal legislation relating to the Hope Tax Credit requires that all postsecondary institutions report the Social Security Number of all postsecondary students to the Internal Revenue Service. This IRS requirement makes it necessary for colleges to collect the Social Security Number of every student. A student may refuse to disclose his/her Social Security Number to the College, but refusing to comply with the federal requirement may result in fines established by the IRS.

Chipola College does not discriminate against any persons, employees, students, applicants or others affiliated with the college with regard to race, color, religion, ethnicity, national origin, age, veteran's status, disability, gender, genetic information, marital status or any other protected class under applicable federal and state laws, in any college program, activity or employment. Inquiries may be directed to Karan Davis, Associate Vice President of Human Resources and Equity Officer, 3094 Indian Circle, Building A, Room 184B, Marianna, FL 32446, 850-718-2205, davisk@chipola.edu

I acknowledge by my signature I understand the College is collecting my social security number for the purpose of complying with federal and state statutes related to employment, financial and academic assistance, and inter-institutional articulation or transfer, and that the College may disseminate that information in some communications with outside organizations, while taking precautions to safeguard use of the number. I certify that the answers given herein are true and correct. I further understand that a false statement in this application or any admission document will subject me to penalties pursuant to 837.06, Florida Statutes; and is grounds for denial of admission or, upon further discovery, grounds for dismissal and invalidation of college credit or degree based on such credit. I agree to the release of all my transcripts and test scores to this institution. I hereby authorize Chipola College to transfer my student records electronically from any Florida school previously attended or to any institution of my choice. I agree that if any credentials are not complete within three weeks after registration, I may be suspended from classes without a refund of fees.

STUDENT'S SIGNATURE _____ DATE _____

A "resident for tuition purposes" is a person who has, or a dependent person whose parent or legal guardian has established and maintained legal residence in the state for at least twelve months. Living in or attending school in a state will not, in itself, establish legal residence. Students who depend on out-of-state parents for support are presumed to be legal residents of the same state as their parents.

The form is an abbreviated format and is not reflective of the entire statute (FS1009.21), which governs the decisions rendered by state colleges and universities. Residency classifications are determined by state law and not by Chipola College. For additional information, please refer to the statute, state rule and the guidelines-all of which may be viewed at: www.facts.org>>applyingforcollege>>residencyguidelines

Definitions - Dependent: A person for whom 50% or more of his/her support is provided by another as defined by the IRS. Independent: A person who provides more than 50% of his/her own support. Return to:
 Admissions and Records
 Chipola College
 3094 Indian Circle
 Marianna, Florida 32446-2053

Check state of residency: FLORIDA ALABAMA GEORGIA OTHER - Complete Non-Resident Statement at bottom of page.

If any of the following statements are true, check that box and then fill out the "Residency Claimant Information" below. If you do not meet any of these criteria, you are a non-resident for tuition purposes and you should sign the Non-Resident Statement at the bottom of this form.

- 1. I am an **independent person** and have maintained legal residence in the state checked above for at least 12 months immediately preceding the first day of classes in term for which this application is submitted. (If under age of 24 years, you must provide one of the following: (1) marriage certificate, (2) copy of birth certificate for student's legal dependent(s), or (3) proof of self-supporting income along with copy of your and your parent's most recent tax return.)
- 2. I am a **dependent person under age 24** and my **parent/legal** guardian has maintained legal residence in the state checked above for at least 12 months. (The Parent or Legal Guardian must complete the claimant information below.) (Legal Guardian must provide documentation of court-appointed guardianship.)
- 3. I am a dependent person under age 24 who has **resided for five years** with an adult relative other than my parent or legal guardian, and my relative has maintained legal residence in state checked above for at least 12 months. (Provide copy of tax returns or other proof.)
- 4. I was **previously enrolled at a Florida institution of higher education** and classified as a Florida resident for tuition purposes. I abandoned my Florida domicile less than twelve months ago and am now reestablishing Florida legal residence. (Documentation Required)
- 5. I am a **permanent resident alien or other legal alien** according to the Bureau of Citizenship and Immigration Services, granted indefinite stay and have maintained a domicile in the state listed above for at least 12 months. (Required: Copy of Permanent Resident Alien card or other immigration documents, proof of state residency)
- 6. I am an **active duty member** of the Armed Services of the United States residing or stationed in the above state; active drilling member of the state National Guard; or military personnel not stationed in the state whose home of record or state residence certificate, DDForm 2058, is the state listed above.(and spouse/dependent children s. 1009.212(10)(a). FS) (Provide copy of military orders.)
- 7. I am an **active duty member** (or spouse, dependent child of a member) of the Armed Services of the United State attending public community college or university within 50 miles of the military establishment where the member is stationed, if such establishment is within a county contiguous of Florida.
- 8. I am a **full-time instructional or administrative employee employed in the state** checked above by a public school, community college or institution for higher education or I am the employee's spouse or dependent child. (Provide copy of employment verification.)
- 9. I am a **qualified beneficiary** under the terms of the **Florida Pre-Paid Postsecondary Expense Program**. S.240.551,F.S.(Copy:Florida Pre-Paid card and claimants residency)
- 10. I am a full-time employee of a state agency or a political subdivision of the state whose student fees are paid by the state agency or political subdivision for the purpose of job-related law enforcement or corrections training. (Provide copy of employment verification.)

For additional information, exemptions and special qualifications visit www.facts.org>>applyingforcollege>>residencyguidelines

Residency Claimant Information - This section must be completed by the claimant. Additional information is listed on the back of this form.

Name of Student _____ Student's SSN _____

Name of Claimant _____ I am the student parent Legal Guardian Other _____

Claimant's permanent legal address: _____ County of Residence _____

Date Claimant Began Establishing Residence ____/____/____ In the State of _____ (Florida, Alabama, or Georgia)

Two (2) documents supporting the establishment of legal residence must be dated, issued or filed at least 12 months before the first day of classes of the term for which residency is sought. Documentation is subject to verification. Failure to establish residence will result in student being classified as out-of-state for tuition purposes.

Driver's License: State _____ Number _____ Current Issue Date ____/____/____

Voter Registration: State _____ County _____ Number _____ Issue Date ____/____/____

Vehicle Registration:*State _____ Lic. Tag Number _____ *Current Issue Date ____/____/____

* (List last 2 consecutive years of registration dates, if using vehicle registration as proof.) *Previous Issue Date ____/____/____

I do hereby swear to affirm that the above named student meets all requirements indicated in the checked category above for classification as a resident for tuition purposes. I understand that a false statement in this affidavit will subject me to penalties for making a false statement pursuant to 837.06 Florida Statutes.

Signature of CLAIMANT _____ **Date**

NON-RESIDENT STATEMENT

I understand that I **do not qualify as a resident of Florida, Alabama, or Georgia for tuition purposes** for the term for which this application is submitted. If I should qualify for a future term I must file the required documentation prior to the beginning of the term to be considered for residency reclassification.

Signature of Non-Resident Student _____ **State of Residence** _____ **Date**

RESIDENCY FOR TUITION PURPOSES

Florida Students – A Florida “resident for tuition purposes” is a person who has or a dependent person whose parent or legal guardian has established and maintained legal residence in Florida for at least 12 months prior to the first day of classes.

Alabama and Georgia Students – Beginning 2003, the Florida legislature allowed Chipola College the option of providing residents of Alabama and Georgia differential tuition assessment. This means eligible Alabama and Georgia students will pay the current in-state tuition and an additional \$1.00 per credit hour.

Determining a Claimant - The claimant is the person who will provide the necessary documentation for establishing Florida residency for tuition purposes. The following individuals may act as claimants:

- 1. Student** – the student can act as his or her own claimant if any one of the following applies:
 - Student is 24 years of age or older by the first day of classes of the term for which residency is sought at a Florida institution;
 - The student is married (provide marriage certificate or joint tax return);
 - The student has children who receive more than half of their support from the student (provide birth certificate and tax returns);
 - The student has other dependents who live with and receive more than half of their support from the student (provide tax returns);
 - The student is a veteran of the United States Armed Forces or is currently serving on active duty in the United States Armed Forces for purposes other than training (provide DD-214 or military orders);
 - Both of the student’s parents are deceased or the student is or was (until age 18) a ward/dependent of the court (provide proof)
- 2. Parent / Legal Guardian** – a parent or legal guardian will be the claimant for any student under 24 who does not otherwise qualify as a claimant; when a legal guardian other than the student’s parent acts as claimant, provide proof of court-appointed guardianship
- 3. Adult Relative** – for students under the age of 24, when the adult relative has claimed the student on his/her taxes for the past five consecutive years; provide tax returns and proof of physical presence in Florida for past 12 months for both student and adult relative

To be classified as a resident for tuition purposes the claimant must provide evidence of physical and legal ties to Florida. The residency determination must be documented by the submission of written or electronic verification that includes two or more of the following documents dated at least 12 months prior to the first day of classes. Failure to provide the information could result in “out-of-state resident” classification for tuition purposes. Living in or attending school in a state will not, in itself, establish legal residence.

Primary Documents (at least one of the two documents must be from this list)

- State Driver’s license issued 12 months prior to the first day of classes
- State Identification card issued 12 months prior to first day of classes (only for individuals who do not or cannot drive) accompanied by notarized statement indicating that the claimant does not drive, does not hold a driver’s license in any state, and does not own a vehicle.
- Voter’s registration card or Florida voters can visit the voter registration confirmation web page and print results from <http://registration.election.myflorida.com/>
- Vehicle registration (last 2 consecutive years) A history print out may be obtained from the Tax Collector’s Office.
- Proof of a permanent home that is occupied as a primary residence of the claimant.
- Proof of homestead exemption – Current property tax form to verify homestead exemption or do a property search from county property appraiser’s website and print page with sales history and exemptions.
- Transcripts from a high school for multiple years (at least 2 academic years), if high school diploma or GED was earned within last 12 months.
- Proof of permanent full-time employment – A letter from employer on official letterhead stating claimants name, address, start date and end date of employment, and indicating full-time employment for at least 30 hours per week for a 12 month period.

Other Documents (may be used in conjunction with one Primary Document)

- Declaration of Domicile (Must show 12 months from the date the document was sworn and subscribed as noted by the Clerk of Circuit Court.)
- A professional or occupational license
- State incorporation
- Proof of membership in state-based charitable or professional organizations
- Any other documentation that supports the student’s request for residency; including, but not limited to:
 - utility bills and proof of 12 consecutive months of payments
 - lease agreement and proof of 12 consecutive months of payments
 - official state or court documents evidencing legal ties to state

Unacceptable Documents (may not be used) Hunting/fishing licenses, Birth Certificate, Insurance cards, Library Cards, Passport

Reclassification – Contact the Admissions and Records Office for additional information.

Additional Information flvs.org is Florida’s official online student advising system. It is provided by the Florida Department of Education to help students make informed choices about their education. For further information regarding Residency Guideline, visit http://files.flvc.org/pdfDocuments/manuals/ACC_Residency_Guidelines_October_24_2012.pdf