

<input type="checkbox"/>	
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Citizenship Information

Country of Citizenship: _____ Country of Birth: _____

- | | | |
|--|---|---|
| <input type="checkbox"/> U.S. Citizen | <input type="checkbox"/> Permanent Resident Alien | <input type="checkbox"/> Temporary Resident Alien |
| <input type="checkbox"/> Non-Immigrant Visa Holder | <input type="checkbox"/> International Student (F1) | <input type="checkbox"/> Undocumented Alien |

For Non- U.S. Citizens only

Alien #: _____	Date Issued: _____	Expiration Date: _____
Visa Type: _____	Date Issued: _____	Expiration Date: _____

(Select one and complete relevant information)

Your Educational Background

- I have received a standard High School diploma. | I am currently attending High School. Expected graduation date: _____
 High School Name: _____ City: _____ State: _____
 If foreign, list country: _____ Date earned:(mm/dd/yy) _____
- I have received a G.E.D. (General Education diploma).
 State where GED was earned: _____ Date earned:(mm/dd/yy) _____
- I have completed a Home School High School equivalent program. *Please have legal guardian complete the PSC Home School Affidavit.*
 Date earned:(mm/dd/yy) _____
- I have previously attended college. (List all) _____ Degree Earned: _____
 From: _____ To: _____

From: _____ To: _____
 I am a Veteran of the U.S. Armed Forces.

Veteran Information

(Mark one for each parent)

Educational Background of Your Parents

	Father	Mother		Father	Mother
Grammar School or Less	<input type="checkbox"/>	<input type="checkbox"/>	Bachelor's Degree	<input type="checkbox"/>	<input type="checkbox"/>
Some High School	<input type="checkbox"/>	<input type="checkbox"/>	Some Graduate School	<input type="checkbox"/>	<input type="checkbox"/>
High School Graduate	<input type="checkbox"/>	<input type="checkbox"/>	Master's	<input type="checkbox"/>	<input type="checkbox"/>
Postsecondary School other than College	<input type="checkbox"/>	<input type="checkbox"/>	Doctorate Degree	<input type="checkbox"/>	<input type="checkbox"/>
Some College (no degree completed)	<input type="checkbox"/>	<input type="checkbox"/>	Unknown	<input type="checkbox"/>	<input type="checkbox"/>
Associate Degree	<input type="checkbox"/>	<input type="checkbox"/>			

Disclaimer and Signature

STATEMENT OF APPLICATION

Have you ever been convicted of a felony or experienced disciplinary problems at another educational institution? Yes No If yes, please submit a written statement explaining the circumstances with your application for review prior to admission. Use additional paper if necessary. This information will be handled confidentially.

I hereby apply for admission to Polk State College and I certify that the above information is accurate and complete, and I understand that to make false or fraudulent statements within this application or residency statement may result in disciplinary action, denial of admissions and invalidation of degrees earned. I agree to abide by the policies outlined in the Florida statutes and state Department of Education regulations for the operation of community colleges. I certify as a condition of my admission that I will not engage in the unlawful manufacture, distribution, or use of a controlled substance during enrollment at Polk State College in accordance with the Drug Free Campus Program. Rules and regulations are subject to change by the Florida Legislature, the Department of Education, and the Polk State College Board of Trustees. I acknowledge that I have read the College's "Notification of Social Security Number Collection and Usage" handout available on the web or in the Admission and Registrar's office.

In accordance with §1001.64(8)(a), F.S., Polk State College may consider the past actions of any person applying for admission or enrollment and may deny admission or enrollment to an applicant because of misconduct or because the College determines he or she would disrupt the orderly process of the college's programs, would interfere with the rights and privileges of other students or employees, and/or would represent a safety risk to students, employees, or property. Determinations are made in the best interests of the college.

I understand that I may be provisionally admitted until all my transcripts and related academic records have been received and processed. I agree to the release of any transcripts and test scores to/from Polk State College including, but not limited to, any SAT, ACT or other achievement test scores that this institution may request from other institutions, ACT, the College Board, or American College Testing. If I am an applicant for dual enrollment, early admissions or collegiate high school, I agree to the release of my test scores, course schedules and grades to my high school for posting to my high school transcript. Signature

must be in black or blue pen.

Signature:

Date: