



170 Elm Street  
Enfield, CT 06082

860.253.3000  
www.acc.commnet.edu

**For Office Use Only**

Banner ID @ \_\_\_\_\_  
Received \_\_\_\_\_ Entered \_\_\_\_\_  
Entered by \_\_\_\_\_  
Admit type \_\_\_\_\_ Student type \_\_\_\_\_  
Ability to Benefit met \_\_\_yes \_\_\_no  
Application fee paid \_\_\_yes \_\_\_no \_\_\_waived  
Cash \_\_\_ Check # \_\_\_\_\_ Credit Card \_\_\_\_\_  
Waiver type \_\_\_\_\_

**APPLICATION FOR ADMISSION**

A \$20.00 non-refundable application fee is required, except for those applicants who have previously attended a Connecticut Community College.

**APPLICANT INFORMATION**

Applicant's Legal Name \_\_\_\_\_  
(Last) (First) (Middle)

Former Last Name(s) \_\_\_\_\_

Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_ Gender \_\_\_Male \_\_\_Female

Mailing Address \_\_\_\_\_  
(Number and Street) (City) (State) (Zip Code)

Permanent Address \_\_\_\_\_  
(Number and Street) (City) (State) (Zip Code)

Home Telephone \_\_\_\_\_ Work Telephone \_\_\_\_\_ Cell Telephone \_\_\_\_\_

E-mail Address \_\_\_\_\_

Have you previously attended this college? \_\_\_Yes \_\_\_No If Yes, when? \_\_\_\_\_

Have you previously attended a CT Community College? \_\_\_Yes \_\_\_No If Yes, where? \_\_\_\_\_

For what semester are you applying? \_\_\_Fall \_\_\_Spring \_\_\_Summer \_\_\_Winter Year \_\_\_\_\_

**CITIZENSHIP**

Are you a United States citizen? \_\_\_Yes \_\_\_No If not, are you a Permanent Resident (green card)? \_\_\_Yes \_\_\_No

**ETHNICITY**

\_\_\_White (non-Hispanic) (10) \_\_\_Hispanic (30) \_\_\_American Indian/Alaskan native (50)  
\_\_\_Black (non-Hispanic) (20) \_\_\_Asian/Pacific Islander (40) \_\_\_Prefer Not to Respond (60)  
\_\_\_Other (60) specify \_\_\_\_\_

**FAMILY EDUCATIONAL BACKGROUND**

Does either of your parents hold a Bachelor's degree (four year college degree) or higher? \_\_\_Yes \_\_\_No

**MILITARY STATUS**

Are you a United States Veteran? \_\_\_Yes \_\_\_No Are you currently on active military duty? \_\_\_Yes \_\_\_No  
Are you currently a dependent of an active military family? \_\_\_Yes \_\_\_No

**CONNECTICUT RESIDENCY**

Are you a legal resident of Connecticut? \_\_\_Yes \_\_\_No Connecticut law requires that a student be a citizen or permanent resident living in Connecticut for 12-months prior to the beginning of the semester to be eligible to receive in-state tuition.

\_\_\_Check here if applying under the New England Regional Student Program (NEBHE)

(Note: Out of state students may be eligible for a reduced tuition rate through NEBHE program. For details, see the College catalog or web site.)





**DEGREE STATUS**

In which Degree/Certificate Program are you planning to enroll? (Use list of majors/codes on page 2 of application)

Program Name: \_\_\_\_\_ Program Code: \_\_\_\_\_

**HIGHEST EDUCATIONAL LEVEL (check one only)**

- No High School Diploma or GED (01)       High School Diploma or GED (02)       Some College (06)
- Undergraduate Certificate (05)       Associate Degree (07)       Bachelor Degree (08)
- Master Degree (09)       Other Advanced Degree (10)       Doctoral Degree (11)
- Professional Degree (J.D., M.D., D.D.S., L.L.B.) (12)

**EDUCATIONAL GOALS (check one only)**

- Certificate (Credit) (CT)     Transfer without an Associates Degree (DN)     Improve English skills (ES)
- Associate Degree (DG)     Job preparation/retraining course (JB)     Developmental (college prep) education (DV)
- Fulfill another college's requirement(s) (AC)     Job Promotion (JP)     Unsure at this time (UN)
- Transfer with an Associate Degree (DT)     Personal Development course(s) (PD)     Other goal (NL)

**ACADEMIC BACKGROUND**

- Do you have a high school diploma?  Yes  No  Pending      Graduation Year (anticipated or actual) \_\_\_\_\_
- Name of high school \_\_\_\_\_ Town \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_
- Do you have a general equivalency diploma (GED)?  Yes  No Year \_\_\_\_\_ GED# \_\_\_\_\_ Town/State \_\_\_\_\_
- Do you have an adult high school diploma?  Yes  No If Yes, Year \_\_\_\_\_ Town/State \_\_\_\_\_
- Do you have a home schooled diploma?  Yes  No If Yes, Graduation Year (anticipated or actual) \_\_\_\_\_
- Have you participated in the *High School Partnership* program through the CT Community Colleges?  Yes  No
- Have you participated in the *Tech Prep* program through the CT Community Colleges?  Yes  No

**PREVIOUS COLLEGE BACKGROUND**

College/University Name	State	Dates of Attendance	Graduation Date	Degree Awarded
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Degree or Certificate students, who wish to have their credits transferred, must submit *official* transcript(s) to the Admissions Office. If you wish to receive consideration for exemption from placement testing enclose an unofficial transcript.

**INTERNATIONAL STUDENT INFORMATION**

International Visa Holder (indicate type) \_\_\_\_\_ Visa Admission Number \_\_\_\_\_

Visa Start Date \_\_\_\_\_ Visa End Date \_\_\_\_\_

**EMPLOYMENT INFORMATION**

Check appropriate option:  Employed full-time       Employed part-time

Name of Employer \_\_\_\_\_

Town and State of Employer \_\_\_\_\_

Title/Position \_\_\_\_\_ Does your employer have a tuition reimbursement program?  Yes  No

**APPLICANT SIGNATURE**

*It is understood that the \$20.00 fee covers the cost of processing the application and that fee is not refundable for any reason. If admitted, the applicant is willing to abide by all rules and regulations of the College and recognizes that any misleading information given in the application may be cause for dismissal.*

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

*If the applicant is a minor (under 18 years of age), a signature of a parent or guardian is required, approving the application and assuming financial responsibility for the student making this application in accordance with the conditions and terms contained in the College catalog.*

Parent's/Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Affirmative Action/Equal Opportunity**

Asnuntuck Community College adheres to the principles of affirmative action/equal opportunity in admission and employment. The College does not discriminate against any individual on the grounds of race, color, religious creed, sex, age, national origin, ancestry, mental status, mental retardation, learning disability, physical disability, sexual orientation, political beliefs, veteran status, or prior conviction of a crime, unless the provisions of sec. 46a-80(8) of the Connecticut general statutes are controlling.



# Credit Course Registration

## MAIL OR FAX REGISTRATION FORM

Summer 2007 Courses Only - This form will be accepted by the Registrar's Office from April 2, 2007 through July 8, 2007

By Mail:  
Registrar's Office  
Asnuntuck Community College  
170 Elm Street, Enfield, CT 06082

By Fax: 860-253-3016  
Attn: Registrar's Office  
At any time

Questions?  
860-253-3017 or 860-253-3015  
Monday through Friday  
8:30 a.m. to 4:30 p.m.

**You may use this form if you are (circle one):**

- A continuing student registering for credit courses
- A student new to Asnuntuck registering for credit courses

**NOTE:** IF NEW TO ACC and taking credit courses, please also complete the application form on pages 21-22 and include a \$20.00 application fee.

**Please type or print clearly.**

Name: \_\_\_\_\_ Student ID or Social Security #: \_\_\_\_\_  
Last First MI Degree/

Permanent Address: \_\_\_\_\_  
Number and Street Apt.No. Program: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  Check here if new address or name change

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Semester last attended ACC: \_\_\_\_\_ Fall \_\_\_\_\_ Spring \_\_\_\_\_ Summer Year \_\_\_\_\_

Have you applied for Financial Aid? \_\_\_\_\_ Yes \_\_\_\_\_ No

Are you receiving VA benefits? \_\_\_\_\_ Yes \_\_\_\_\_ No

Will you graduate in May? \_\_\_\_\_ Yes \_\_\_\_\_ No

**Please list courses below:**

CRN #	Dept.	No.	Title	Time	Day	CR
1.	_____	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____	_____

Total Credits: \_\_\_\_\_

Total Tuition and fees due (See page 16) \$ \_\_\_\_\_

Application Fee (if applicable) \$ \_\_\_\_\_

Grand Total Due \$ \_\_\_\_\_

To the best of my knowledge, the information given on this registration form is complete and accurate. I assume responsibility for knowing and following course prerequisites, corequisites and program requirements. NOTE: IF PREREQUISITE WAS NOT TAKEN AT ACC, ATTACH PROOF.

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Payment Information:** Make checks payable to ACC, or indicate Visa or Mastercard number below:

Enclosed/Authorized Amount \$ \_\_\_\_\_ Paid By: Personal Check, Money Order, Visa, MasterCard

Check or Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Signature of Cardholder \_\_\_\_\_

OFFICE USE ONLY

Registrar's Office Approval \_\_\_\_\_ Date \_\_\_\_\_

Written confirmation of your registration will not be mailed to you. However, you may verify your registration through our Web Site at

[www.online.commnet.edu](http://www.online.commnet.edu). See page 19 for detailed information on accessing your record.

