MIDDLESEX COMMUNITY COLLEGE NEW STUDENT APPLICATION CHECKLIST

DEGREE-SEEKING APPLICANTS
(New and Transfer Students)

Middletown Campus
100 Training Hill Rd.
Middletown, CT 06457
860-343-5719

Meriden Center
55 West Main St.
Meriden, CT 06451
203-238-6202

☐ 1. APPLICATION

- Complete and sign the New Student Application for Admission
- $20 Application Fee

☐ 2. TRANSCRIPTS

- Proof of high school or GED completion

Students who have a college or university degree may submit proof of their degree completion in lieu of a high school diploma.

☐ 3. MMRV

- Show proof of two doses of Measles/Mumps/Rubella/Varicella Immunization

Adequate Immunization:

- Measles, Mumps, Rubella: Two doses administered at least one month apart
- Varicella (Chicken Pox): Two doses or provide certification from physician that student has had disease. Students born in the United States before 1980 are exempt from the Varicella requirement.

A student's health and that of the campus community depend upon compliance with this legislation. For additional information, including exemptions please visit: ***www.mxcc.edu/immunizations****.*

☐ 4. BASIC SKILLS ASSESSMENT

- To schedule an appointment, please visit **www.mxcc.edu/BSA** or call the College Learning Center at 860-343-5770.

This assessment information is important to ensure a student's success in college, and, in conjunction with an academic advisor, will further assist in defining the appropriate level of coursework for students.

☐ 5. FINANCIAL AID

- Students interested in applying for financial aid should complete the online Free Application for Federal Student Aid (FAFSA), available at **www.fafsa.ed.gov**. The federal school code for Middlesex is 008038. For more information, please call the Office of Financial Aid Services at 860-343-5741 or visit **www.mxcc.edu/financialaid**.

NON-DEGREE SEEKING APPLICANTS

☐ 1. APPLICATION

- Complete and sign the Student Application Form
- $20 Application Fee

☐ 2. BASIC SKILLS ASSESSMENT

- To schedule an appointment, please visit **www.mxcc.edu/BSA** or call the College Learning Center at 860-343-5770.

This assessment information is important to ensure a student's success in college, and, in conjunction with an academic advisor, will further assist in defining the appropriate level of coursework for students.

Office of Admissions
100 Training Hill Road
Middletown, CT 06457
Phone: 860-343-5719
Fax: 860-344-3055
www.mxcc.edu

Apply online at
http://my.commnet.edu

MIDDLESEX COMMUNITY COLLEGE

For Office use only Date_____

Banner ID @ | | | | | | | | |

Application Fee paid Yes _____ No _____

Cash ____ Check #_____ Money Order ____ Waived _____

Credit Card #_____

Exp. Date_____

APPLICATION FOR ADMISSION

PLEASE PRINT CLEARLY USING BLUE OR BLACK INK.

APPLICANT'S LEGAL NAME (Last) (First) (Middle)

FORMER LAST NAME(S) | **SOCIAL SECURITY NUMBER** | **BIRTH DATE** Month Day Year

MAILING ADDRESS (No. and Street) (Apt. #) (City or Town) (State) (Zip Code)

PERMANENT ADDRESS (No. and Street) (Apt. #) (City or Town) (State) (Zip Code)

HOME TELEPHONE (Area code) | **WORK TELEPHONE** (Area code) | **CELL** (Area code)

EMAIL | **GENDER:** MALE ❑ FEMALE ❑

Have you ever attended this college? ☐ Yes ☐ No If yes, when? _____

Have you previously attended a CT Community College? ☐ Yes ☐ No If yes, where?_____

For which semester are you applying? ☐ Fall (Sept-Dec) ☐ Spring (Jan-May) ☐ Winter (Dec-Jan) ☐ Summer (Jun-Jul) Year_____

CITIZENSHIP

Are you a United States citizen? ☐ Yes ☐ No If no, are you a Permanent Resident? (Green Card holder) ☐ Yes ☐ No

ETHNICITY/ RACE

Please provide the following ethnicity and race data. This information is requested on a *voluntary basis by the U.S. Department of Education*, National Center for Education Statistics. Your answer will not affect admission to or registration in the college.

Do you consider yourself to be Hispanic/Latino? ☐ Yes ☐ No

What is your race? Select one or more: ☐ White(10) ☐ Black or African American(20) ☐ Asian(45) ☐ Other(90) ☐ American Indian or Alaskan Native(50) ☐ Native Hawaiian or Other Pacific Islander(80)

FAMILY EDUCATIONAL BACKGROUND

Do either of your parents hold a Bachelor's Degree (4-year College Degree) or higher? ☐ Yes ☐ No

MILITARY STATUS

Are you currently on active duty with the U.S. armed forces? ☐ Yes ☐ No (ACTD)

Are you currently a member of the National Guard or Reserve? ☐ Yes ☐ No (NGRE)

Have you ever served in the U.S. armed forces? ☐ Yes ☐ No (VET1)

Are you a dependent of a member of the U.S. armed forces? ☐ Yes ☐ No (VETD)

If you answered "Yes" to any of these questions you may be entitled to benefits and you should meet with the College's Veterans Certifying Official (VCO).

IN-STATE TUITION

1. I am eligible for in-state tuition because I have continuously resided in Connecticut for at least one year and Connecticut is my permanent home.
___Yes___No

2. Even though I answered "No" to the question above, I claim and can demonstrate through documentation that I am eligible for in-state tuition.
___ Yes___ No

3. ___ Check here if applying under the New England Regional Student program (NEBHE).
Out-of-state students may be eligible for a reduced tuition rate through the NEBHE program. For details, see the college catalog or website.

If you answered "Yes" to question #2 or checked question #3, you must submit a "Declaration of Eligibility for In-State or NEBHE Tuition" for review and determination of eligibility.

DEGREE STATUS

In which degree or certificate program are you planning to enroll?_____

Use the list of majors/codes on back of application. Please write major name and code above.

HIGHEST DEGREE LEVEL (check only one)

- ☐ No High School Diploma or GED (01)
- ☐ High School Diploma or GED (02)
- ☐ Some College (06)
- ☐ Undergraduate Certificate (05)
- ☐ Associates Degree (07)
- ☐ Bachelor's Degree (08)
- ☐ Master's Degree (09)
- ☐ Other Advanced Degree (10)
- ☐ Doctoral Degree (11)
- ☐ First Professional Degree (JD, MD, DDS, LLB) (12)
- ☐ Sixth-Year Certificate (13)

EDUCATIONAL GOALS

- ☐ Certificate (credit) (CT)
- ☐ Transfer with an Associates Degree (DT)
- ☐ Transfer without an Associates Degree (DN)
- ☐ Improve English Skills/Proficiency (ES)
- ☐ Associates Degree (DG)
- ☐ Job Preparation/Retraining Course (JB)
- ☐ Fulfill other college's requirement (AC)
- ☐ Job Promotion (JP)
- ☐ Unsure at this time (UN)
- ☐ Personal Development Course(s) (PD)
- ☐ Other Goal (NL) _____
- ☐ Developmental (College Prep) Education (DV)

ACADEMIC BACKGROUND

Do you have a High School Diploma? ☐ Yes ☐ No ☐ Pending Graduation Year _____

Name of High School_____ Town_____ State_____ Country _____

Do you have a General Equivalency Diploma (GED)? ☐ Yes ☐ No Year_____ Town/State _____

Do you have an Adult High School Diploma? ☐ Yes ☐ No Graduation Year_____Town/State_____

Do you have a Home School Diploma? ☐ Yes ☐ No Graduation Year_____Town/State_____

Have you participated in the High School Partnership Program through the CT Community Colleges? ☐ Yes ☐ No

Have you participated in the College Career Pathways/Tech Prep Program through the CT Community Colleges? ☐ Yes ☐ No

PREVIOUS COLLEGE BACKGROUND

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

INTERNATIONAL STUDENT INFORMATION

Are you an International Student who needs an I-20 form for an F1 Student Visa? ☐ Yes ☐ No

Other Visa Holder (indicate type)_____ Visa Admission Number _____

Visa Start Date_____ Visa End Date _____

International Address _____

EMPLOYMENT INFORMATION

☐ Employed Full Time ☐ Employed Part-time ☐ Unemployed

Name of Employer_____Address of Employer_____

Title/Position_____ Does your Employer have a Tuition Reimbursement Program? ☐ Yes ☐ No

E-MAIL COMMUNICATIONS

I request the College forward to me at the e-mail address I have provided all correspondence, including personally identifiable information pertaining to me from College records that are protected by Family Educational Rights and Privacy Act (FERPA). **Initial:**_____

CONSENT FOR THE DISCLOSURE OF EDUCATION RECORDS

I understand that to maintain accurate student records, including the records pertaining to my attendance at the College, and for other necessary business purposes, the College may need to release or provide access to personally identifiable information in its records pertaining to me to another College in the CT Community College System or to the System's administrative office. Accordingly, I hereby authorize the College to release or allow access to such information to those indicated for the purposes described. **Initial:**_____

I certify with my signature below that I am the applicant and that the information I have provided above is accurate. If admitted, I pledge to comply in good faith with all the rules and regulations of the College. I realize that any misleading information provided by me on this application may be cause for dismissal. I understand that information collected in this application is for reporting purposes only and will not be used in the selection process for admission.

Student Signature_____ **Date**_____

Parent/Guardian Signature (if under 18)_____ **Date**_____

Indicate the Degree or Certificate in which you plan to enroll.
Please check only one choice of an associate degree or certificate program.

DEGREE PROGRAMS

ALLIED HEALTH
- ☐ Ophthalmic Design and Dispensing (FA73)
- ☐ *Radiologic Technology (FA76)
- ☐ *Veterinary Technology (FA06)

**Admission into the Radiologic Technology and Veterinary Technology programs are selective. Students applying for admission into the Radiologic Technology or Veterinary Technology programs will be accepted into the General Studies program until the formal admission selection process is complete. For additional information please contact the Office of Admissions at 860-343-5719.*

ART
- ☐ Fine Arts (FA12)
- ☐ Graphic Design Track (FA11)

BUSINESS
- ☐ Accounting (FA03)
- ☐ Business Administration (FA67)
- ☐ Information Systems (FA25)
- ☐ Management Information Systems (FA18)
- ☐ Marketing (FA35)

COMMUNICATIONS
- ☐ Broadcast Cinema (FA91)
- ☐ Communication (FA90)
- ☐ Multimedia (FA83)

CRIMINAL JUSTICE
- ☐ Criminal Justice (FA45)

EARLY CHILDHOOD
- ☐ Early Childhood Education (FA46)

GENERAL STUDIES
- ☐ General Studies (FA20)

HUMAN SERVICES
- ☐ Human Services (FA24)

LIBERAL ARTS AND SCIENCES
- ☐ Humanities Track (FA31)
- ☐ Science Track (FA31)

SCIENCE
- ☐ Biotechnology Program/ (FA02)
- ☐ Forensic Science Track (FA04)
- ☐ Environmental Science (FA09)

COLLEGE OF TECHNOLOGY
- ☐ Engineering Science (FA07)
- ☐ Technology Studies: Manufacturing Machine Technology Option (FF22)

CERTIFICATE PROGRAMS

- ☐ Accounting Assistant (FJ38)
- ☐ Accounting Technician (FJ37)
- ☐ Advertising & Sales Promotion (FJ14)
- ☐ Broadcast Communications (FJ34)
- ☐ Business Skills (FJ51)
- ☐ Communications Networking (FJ49)
- ☐ Customer Service Management (FJ03)
- ☐ Child Development Assoc. (CDA) Credential (FJ43)
- ☐ Early Childhood Education (FJ43)
- ☐ Entrepreneurship (FJ18)
- ☐ Hazardous Materials Operational (FJ20)
- ☐ Hazardous Materials Technician (FJ19)
- ☐ Health Career Pathway (FK55)
- ☐ Help Desk Technician (FJ04)
- ☐ Juvenile Justice (FJ41)
- ☐ Manufacturing Machine Technology (FJ52)
- ☐ Multimedia (FJ29)
- ☐ Multimedia Web Design & Development (FJ36)
- ☐ Software Developer (FJ50)
- ☐ Substance Abuse Education (FJ02)
- ☐ Therapeutic Recreation (FJ27)

OTHER

- ☐ Dietetic Technician-for students planning to transfer to Gateway Community College (FA23)
- ☐ English as a Second Language (ESL) Competency
- ☐ Pre-Allied Health/Transfer Requirements-for students planning to transfer to a college or diploma school of nursing (FA20)

FULL TIME/PART TIME

- ☐ I intend to be a FULL TIME student at MxCC (12 credits and above per semester).
- ☐ I intend to be a PART TIME student at MxCC.

NON-DEGREE

- ☐ I do not wish to be a degree student at this time.

HOW DID YOU LEARN ABOUT MXCC?

- ☐ High school visit
- ☐ Radio
- ☐ Newspaper ad
- ☐ Family/Friend
- ☐ High school counselor
- ☐ Other_____

STATE OF CONNECTICUT
Board of Regents for Higher Education

MIDDLESEX COMMUNITY COLLEGE
OFFICE OF ADMISSIONS
100 Training Hill Road
Middletown, CT 06457
860-343-5719

Visit our Web Site:
www.mxcc.edu

To help us process your application as quickly and efficiently as possible, please check the following before you send us your application. Have you…

- ☐ paid the application fee?
- ☐ signed the application?
- ☐ recorded your correct Social Security number and birthdate?
- ☐ provided an active email address?

MxCC does not discriminate on the basis of race, color, national or ethnic origin, religion, age, sex, marital status, sexual orientation, physical disability, mental disability (or history thereof) or criminal record in its educational and employment practices. Political beliefs and veteran status are also part of the nondiscrimination coverage in the Board of Trustees' Policy on Student Rights. Further, racism and sexual harassment are prohibited. Inquiries regarding this policy should be directed to the Director of Human Resources (860-343-5751) or the Dean of Students (860-343-5759) at: MxCC, 100 Training Hill Road, Middletown, CT 06457.

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