



Santa Barbara City College

ADMISSION APPLICATION

PLEASE PRINT CLEARLY

**APPLICATION DEADLINE:
FRIDAY PRIOR TO THE START
OF THE SEMESTER**

Return to:

Santa Barbara City College

Office of Admissions & Records

721 Cliff Dr., Santa Barbara, CA 93109-2394

1 ENTER
|||

Semester of Application (CHECK ONE): Fall Spring Summer Summer and Fall 20

2 ENTER
|||

Social Security Number: - - Gender: 1 - Male
2 - Female

3 ENTER
|||

Birthdate: MONTH DAY YEAR Age: Place of Birth: _____
STATE/COUNTRY

4 ENTER
|||

Legal name as you wish it to appear on your records:

LAST NAME FIRST NAME MIDDLE INITIAL

5 ENTER
|||

Name on previous records if different than above:

LAST NAME FIRST NAME MIDDLE INITIAL

6 ENTER
|||

Address (MUST BE COMPLETED):

NO./STREET (AND APT.) _____
CITY STATE ZIP PHONE: AREA CODE NUMBER

7 ENTER
|||

High School Last Attended:

If the high school you are attending or last attended is listed below, write the 6-digit code in this box.

SB South County

424013: Anacapa
424027: Bishop Garcia Diego
423058: Carpinteria
424089: Cate
424151: Devereux
423172: Dos Pueblos
424182: Dunn

423010: El Puente

423269: La Cuesta
424275: Laguna Blanca
423523: San Marcos
423572: Santa Barbara
SB North County
423045: Cabrillo
423306: Lompoc

423461: Righetti

423603: Santa Maria
423634: Santa Ynez
Ventura County
563079: Buena
563161: Camarillo
563284: Hueneme
563407: Nordhoff

563454: Oxnard

563476: Rio Mesa
564486: St. Bonaventura
563700: Thousand Oaks
563782: Ventura
LA County
193008: Agoura
193178: Calabasas
193353: Glendale

If your high school was not listed above, write the name and location:

ENTER
|||

NAME OF HIGH SCHOOL AND CITY COUNTY, IF CALIFORNIA STATE OR COUNTRY, IF NOT CALIFORNIA

8 ENTER
|||

Education Status as of the semester of application:

Please respond based on what your status will be when you begin classes at SBCC. If you are in high school and expect to graduate before enrolling, choose 4.

- 1 - Not grad. of/not enrolled in High School
- 4 - Received High School Diploma
- 5 - Passed GED/Cert. of Equiv./Completion

- 6 - Passed High School Proficiency Exam
- 7 - Foreign High School Graduate
- 8 - Associate Degree (AA/AS)
- 9 - Bachelor's Degree (or higher)

ENTER
|||

Year of Graduation/Degree/Exam: 19/20

(Also complete reverse side)

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9 ENTER **Enrollment Status** (Enter appropriate number in box):
 1 - New (Never attended any college before, or attended while in high school)
 2 - New Transfer (Attended college, but not SBCC)
 3 - Returning Transfer (Attended SBCC, but last attended another college)
 4 - Returning (Last attended SBCC, but not last semester, not Continuing/Adult Education)

NOTE: If you indicate 3 or 4, write year you last attended SBCC: _____

10 ENTER **List All Colleges Attended:** (Most recent first) (Sending transcripts to SBCC is recommended.)

COLLEGE OR UNIVERSITY	CITY	STATE/COUNTRY	FROM	TO
1				
2				
3				

11 ENTER **Employment Expectation:** Hours to be worked per week during semester:
 1 - 0/none 2 - 1 to 9 3 - 10 to 19 4 - 20 to 29 5 - 30 to 39 6 - 40/more 7 - Unknown

12 ENTER **Citizenship** 1 - U.S. citizen
 2 - Temporary Resident
 3 - Permanent Resident
 4 - Refugee/Asylee
 5 - Student Visa (F-1, J-1 or M-1)
 6 - Other (Specify) _____

If not a U.S. citizen, please indicate:
Alien Number _____
Issue Date ____/____/____
Month Day Year

Verification of visa status is **required**. Students must be prepared to **present proof** of status.

13 ENTER **Code for Program of Study (Major)** (See Code Listings):

14 ENTER **Educational Goal at SBCC:**

Degree/Certificate: 1 - Associate Degree, academic major 2 - Associate Degree, vocational/tech major 3 - Vocational/tech Certificate, without transfer Transfer to 4-Year School: 4 - Transfer, with AA/AS Degree 5 - Transfer, without AA/AS Degree	Job-Related Training: 6 - To discover career interests/goals 7 - Improve present job skills 8 - New career/job skills development 9 - To maintain a certificate/license	Other Goals/Purposes: 10 - Summer Session only 11 - Performance/activity courses 12 - Achieve a High School Diploma 13 - Basic English/reading/math skills 14 - Personal enrichment 15 - Undecided on goals at this time
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15 ENTER **Predominant Ethnic Background:**

10 - White/non-Hispanic 21 - Asian Indian 22 - Chinese 23 - Japanese 24 - Korean 25 - Laotian 26 - Cambodian	27 - Vietnamese 28 - Other Asian 30 - Black/non-Hispanic 40 - Filipino 51 - Mexican/Mex-Amer/Chicano 52 - Central American 53 - South American	54 - Other Hispanic 60 - Amer. Indian/Alaskan native 71 - Guamanian 72 - Hawaiian 73 - Samoan 74 - Pacific Islander 80 - Other non-White
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16 ENTER **Transfer Plans:** 0 - No transfer plans 3 - UC, Berkeley 6 - Cal Poly, SLO 9 - Westmont
 1 - Out of state/foreign 4 - UCLA 7 - CSU, Northridge 10 - Cal private college
 2 - UCSB 5 - Other UC campuses 8 - Other CSU campuses 11 - Community college

17 ENTER **Primary Language:** 1 - English 3 - Farsi 5 - Spanish 7 - Other _____
 2 - Chinese 4 - Japanese 6 - Vietnamese

18 ENTER **Veteran's Status:** 1 - Not a veteran 2 - Veteran 3 - Dependent of a veteran

19 ENTER 1 - Yes 2 - No *I authorize approved college officials to secure my high school and/or college educational records from institutions participating in electronic records exchange systems.*

10/01

FOR OFFICE USE ONLY				SHORT FORM			
College <input type="text"/>				FINISH FORM			
Residency <input type="text"/>				LONG FORM			
Matr.	New ESL Assess Appt.	International Underage		RES		OUT	
Non-Matr. Priority Open	Ret. ESL Priority Open	Dep/Vet				INT'L	
11/14 Open	Out of State	Processed by <input type="text"/>					

(Also complete next page)

Name _____ Social Security Number _____

Birthdate _____ / _____ / _____
LAST FIRST INITIAL MONTH DAY YEAR MUST BE ACCURATE

STATEMENT OF LEGAL RESIDENCE

TO BE COMPLETED BY ALL STUDENTS

State laws regulate admission of students on the basis of legal residence. If additional information is needed, you will be required to complete a supplemental residence questionnaire and/or present evidence in accordance with *Education Code* sections 68040 *et seq.* The burden of proof to clearly demonstrate both physical presence in California and intent to establish residency lies with the student.

All students classified incorrectly as residents are subject to reclassification and payment of all non-resident fees not paid.

The following information will be used in determining your residency status for enrollment. It will not be used in making admission decisions or for any discriminatory purpose.

Select one of the following:

- I am at least 19 years of age OR married and will answer the following questions for myself.
- I am under 19 years of age AND unmarried and will answer the following questions for my parent or guardian.

Have you lived in California for at least the last two (2) years? YES NO

If NO, and you currently reside in California, when did your current stay in California begin? _____ / _____ / _____
MONTH DAY YEAR

Do you intend to maintain California as your state of legal residence? YES NO

During the last two years, have you:

- Declared residency in another state for state income tax purposes? YES NO If YES, what state? _____ year(s) _____
- Registered to vote in another state? YES NO If YES, what state? _____ year(s) _____
- Declared residency at an out-of-state college or university? YES NO If YES, what state? _____ year(s) _____
- Petitioned for a lawsuit or divorce as a resident in another state? YES NO If YES, what state? _____ year(s) _____

Driver's License State _____ Date issued _____

Are you a full-time employee, or spouse or dependent of a full-time employee of any of the following colleges/universities? YES NO

- If YES, please select: California Community College California State University
 University of California Maritime Academy

Are you a full-time credentialed employee of a California public school enrolling in college to fulfill credential requirements? YES NO

If YES, you must submit proof of employment and certification requirements.

MILITARY STATUS (To be completed by applicants with military affiliation)

Military Status - Select any of the following that apply to you:

- 1 - Current Active Military
- 2 - Dependent of Current Active Military
- 3 - Member discharged within the last year (Must provide DD 214)
- 4 - Member discharged over a year ago

If you selected 1, 2 or 3, please complete the following:

- Home state of record _____
- Currently stationed in California? YES NO
- If stationed in California, is it for educational purposes only? YES NO

TO BE COMPLETED BY APPLICANTS UNDER AGE 25 (Parent/Guardian Information)

Father's Name _____	Mother's Name _____
Number & Street _____	Number & Street _____
City, State, Zip _____	City, State, Zip _____
Area Code/Phone No. _____	Area Code/Phone No. _____

TO BE SIGNED BY ALL STUDENTS

I DECLARE UNDER PENALTY OF PERJURY THAT THE STATEMENTS SUBMITTED BY ME ARE TRUE AND CORRECT. All materials submitted by me for the purposes of admission become the property of Santa Barbara City College. I understand that falsification, withholding pertinent data, or failure to report changes in residence may result in my dismissal.

Student's Signature _____ **Date** _____