Lewis-Clark State College Application for Admission

For office use only	

Start Date:	□ Fall 20	☐ Spring 20_		□ Summ	ner 20		
APPLICANT IN	FORMATION						
Legal Name:					Name You P	refer:	
(as on Soc. Sec. Card)		st Fir		Middle			
• • • • • • • • • • • • • • • • • • • •	earing on Records:						
U.S. Social Securit	y Number:	-		Date of	Birth (mo/day/year):	/	1
Permanent Home /		0, 1,10,0,0		0''			
		Street / P.O. Box		City	County	State	Zip
Current Mailing Ad		Street / P.O. Box		City	County	State	Zip
Mailing Address va	alid until the following			,	ail Address:	00	- .p
Cell Phone:				ne Phone:			
				_			
•	USA □Other:		tates in order to		II be required to provide daho residency for tuition		esence in the
Are you a U.S. Mili	-			n·	Service Dates:	to	
•	e or child of U.S. Mil		□ No Branch		Service Dates:	to	
Ethnicity:	Are you Hi	ispanic or Latino?	□ Yes	□ No	Gender:	☐ Female	□ Male
Race: (select one o	<i>r more</i>) □ Americ	an Indian or Alaska Na	ative □ Asia	an			
Emergency Contact For ALL to complete.	ct: If under 18, list parents o	or guardians here.)	Name			Relationship	
Number & Street / P.O	. Box		City	County	State Zip	Area code	Phone
	INFORMATION		J.,	County		7 11 54 55 45	
Intended Degree T		e □ Associate	☐ Bachelor	П Sec	ond Bachelor □ Gra	duate	
Program Type:	☐ Academi		☐ Career Te			addio	
		r for a list of majors off		cillical i 10g	iaiii		
	First			Second	(optional)		☐ Undecided
Envallment Otation		Transfer D.S.	turning /roc-l:		(-p.://		
Enrollment Status:			turning (readmiss				
	oly for federal financ] No			
Campus Location:	☐ Lewiston ☐ C	Coeur d' Alene (limited	degrees available	e)			
ACADEMIC INF	FORMATION						
separate sheet if m To be considered o	ore space is needed.	Students seeking c st be mailed in a seale	ertificates or de	grees must	pols, correspondence, etc. have official transcripts school to the institution's a	submitted from eac	h school listed
Did/Will you gradu	ate from high school	ol? 🛘 Yes (month	/year/)	EdulD:	Do	
High School:				City:		State:	
Do you have a GEI	D or high school equ	uivalency certificate?	☐ Yes (mor	nth/year _	/)	□ No	

If yes, degree-seeking applicants are required to submit official GED test scores.

PREVIOUS COLLEGE ATTENDANCE

Name of College, Trade School, etc.		C	City & State			Attended	Grad. Date	Degree/# Credits Earned		
							<u> </u>			
				 			 			
							-			
							!			
RE	SIDENC	Υ	Idaho residency for tuit determined by county of					, Idaho Code	e and IDAPA 08.01.04	. Residency for community colleges is
State of Residence: From: / / to: / / If less than 12 months, previous state:										
Cou	inty of Res	sider	ce: From:	/	/	to: _		/ H	f less than 12 mont	hs, previous county:
Che	ck applica	able l	ooxes: Documentation	will be requ	ested in o	rder to v	erify Idaho	residency	for tuition purpose	es.
	One or m	nore o	of my parents/legal guar	dians or spou	se's parer	nts is don	niciled in Id	aho and ha	s maintained a bona	a fide domicile in Idaho for at least 12 port from my parents/legal guardians.
	•			·					•	_/ to / /
	I receive than educ	<u>less</u> cation	<u>than</u> 50% of my financia for at least 12 months p	al support fron	n parents/ t day of the	legal gua e term wh	rdians. I ha nich I plan t	ive been do o enroll.	miciled and physica	lly resided in Idaho for purposes other
			to an Idaho resident, w bouse is a resident of							ne term in which I plan to enroll as a
			or my parents/legal guar ia: (Please select one c			eive 50%	or more of	my support	t), is/was a member	of the Armed Forces under one of the
			A member of the Armed	l Forces static	ned in Ida	ıho on mi	litary orders	s, stationed	in	County.
			An officer or an enlisted	member of th	ne Idaho N	lational G	luard.			
			A member of the Arme status, but is not station					service as a	an Idaho resident ar	nd who has maintained Idaho resident
	Separated under honorable conditions from the Armed Forces after at least two years of service. At the time of separation, I designated the State of Idaho as my intended domicile or indicated Idaho as my home of record, and I am entering this institution within one year of the date of separation.									
	Is an Armed Forces veteran, served at least 2 years, separated under honorable conditions, and moved to Idaho for the purpose of establishing domicile and will take steps to establish in Idaho within 1 year of registration at the institution.									
	I received a baccalaureate degree from an Idaho public or private higher education institution, within the past 36 months, and resided in Idaho during the last 12 months of the undergraduate program.									
	I am a member of one of the following Idaho Native American Indian tribes: Coeur d'Alene, Shoshone-Paiute, Nez Perce, Shoshone-Bannock, Kootenai, Eastern Shoshone, Northwestern Shoshone. Lewis Clark State College also recognizes the following American Indian tribes' customary boundaries: Spokane, Kalispel, Colville Confederated Tribes, Confederated Salish-Kootenai Tribes, Confederated Tribes of Umatilla Indian Reservation & Yakama Tribes.									
SIC	SNATUR	F								
In si infor rece	gning this fo mation provi ive state an	orm, I ided is id fed	s complete and true. Men	petween the age employed in a	es of 18 an a state or f	d 25 must ederal job	be registere . You may	d with the Se register with	elective Service to be e Selective Services onli	issal from the institution. I certify that all ligible for enrollment at a state college, to ne at http://www.sss.gov. By signing this he same.
	Acceptance or receipt of financial aid and scholarship awards certifies that the funds will be used for educational purposes.									
Sia	Signature of Applicant: Date:									
3			<u>-</u>	principles and	l laws of th	e State of	Idaho and t	he Federal G		applicable executive orders

pertaining to civil rights. These institutions are committed to the policy that all persons shall have equal access to programs and facilities without regard to age, color, creed, marital status, national or ethnic origin, physical handicap, race, religion, or sex.