

Re-Admit Form



Chattahoochee
TECHNICAL COLLEGE

www.ChattahoocheeTech.edu

Please choose the option or options that apply to you:

- I was a dual/joint enrolled student with CTC.
- I am returning from academic suspension.
- I am graduating/have graduated from a current CTC program.
- I have not attended classes in more than five (5) years. (see Section 6)
- I have not attended classes in three (3) semesters.

SECTION 1 PERSONAL INFORMATION				
SOCIAL SECURITY NUMBER OR STUDENT ID NUMBER	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	DATE OF BIRTH (MM/DD/YY)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
LAST NAME	FIRST NAME	MIDDLE NAME		
ALL PREVIOUS NAMES USED		PRIMARY PHONE NUMBER		
MAILING ADDRESS	CITY	STATE	ZIP CODE	
E-MAIL ADDRESS				
COUNTY (CHECK ONE)				
<input type="checkbox"/> Bartow <input type="checkbox"/> Cherokee <input type="checkbox"/> Cobb <input type="checkbox"/> Pickens <input type="checkbox"/> Paulding <input type="checkbox"/> Other _____				

SECTION 2 STATISTICAL DATA	This information is required for purposes of reporting to Federal Compliance agencies only and will not be used in determining admission status.
GENDER <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	RACE <input type="checkbox"/> American Indian or Alaskan Native (1) <input type="checkbox"/> Asian (2) <input type="checkbox"/> Black or African American (3) <input type="checkbox"/> Native Hawaiian or other Pacific Islander (4) <input type="checkbox"/> White (5)
ARE YOU HISPANIC OR LATINO? <input type="checkbox"/> Yes <input type="checkbox"/> No	

SECTION 3 RESIDENCY INFORMATION	
3A	Are you a U.S. citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes , please go to section 3B.
If No , are you a Permanent Resident? <input type="checkbox"/> Yes <input type="checkbox"/> No Note: Permanent Resident Card <u>must</u> be presented for in-state or out-of-state tuition consideration.	
If Yes , what is your country of citizenship?	
If you are NOT a U.S. Citizen or Permanent Resident, please answer the following:	
What is your current VISA status?	Do you need an F or M student VISA? <input type="checkbox"/> Yes <input type="checkbox"/> No
What is your country of citizenship?	What is your country of birth?

3B	Complete ONLY the section in 3B that describes you. The following information will be used to determine tuition rates and financial aid eligibility. Failure to provide accurate valid information may impact tuition.
<input type="checkbox"/> I am 24 years old or older. 1. Have you lived in the state of Georgia for the last 12 consecutive months? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<i>OR</i>	
<input type="checkbox"/> I am under 24 years old and my parents or guardian claimed me on their most recent tax return. 1. What is your parent/guardian's legal state of residence? _____ 2. How long have they lived continuously in the state listed above? ____years ____months	
<i>OR</i>	
<input type="checkbox"/> I am under 24 years old and no one claimed me on their most recent tax return. 1. Have you lived in the state of Georgia for the last 12 consecutive months? <input type="checkbox"/> Yes <input type="checkbox"/> No	

3C	Do you want to be considered for in-state tuition, if you are eligible? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, additional documentation may be required.
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SECTION 4 PROGRAM INFORMATION

Program of Study*:

 Degree Diploma CertificateSpecialization or health care program desired:

*Please confirm with the Financial Aid Department that your desired program of study is covered. Once the document deadline has passed, or the semester has started, you will not be allowed to change your program of study.

Re-Admit Term: Summer Semester Fall Semester Spring Semester

Year _____

I would like to be readmitted as:

 Regular Returning Student from CTC NMT ATC Transfer Transient Special Admit**SECTION 5 HIGH SCHOOL/ GED INFORMATION**▪ I graduated from high school in _____ (year) **OR** I earned my GED in _____ (year).**SECTION 6 COLLEGE INFORMATION****SINCE YOUR LAST ENROLLMENT***Please list all colleges, universities, and technical schools attended since your last enrollment at Chattahoochee Technical College :***If it has been more than five (5) years since you last attended classes at any of the Chattahoochee Technical College campuses, your academic record has been purged. Please list and re-submit all official college transcripts.**

_____	From: _____	To: _____	_____
Name of School			Degree Earned
_____	From: _____	To: _____	_____
Name of School			Degree Earned
_____	From: _____	To: _____	_____
Name of School			Degree Earned
_____	From: _____	To: _____	_____
Name of School			Degree Earned
_____	From: _____	To: _____	_____
Name of School			Degree Earned

Official transcripts from all previously attended schools must be received by Chattahoochee Technical College in a sealed envelope from the issuing institution. All foreign transcripts must be evaluated by an approved evaluation agency.**All post secondary institutions must have appropriate accreditation for acceptance.*****My signature on this application is my acknowledgment of and agreement with the statements that follow:***

- I understand that pursuant to O.C.G.A. 16-10-20, it is a felony to make a false statement on any state document. In addition, making a false statement on this application may result in dismissal from the college.
- All materials submitted for application become the property of Chattahoochee Technical College and will not be returned to the applicant.
- I give permission for my likeness, voice, or comments to be used in any promotional item on behalf of CTC.
- I give permission for CTC to release information to potential employers as part of the job placement service provided by the college.
- I understand that CTC is not liable for any emergency medical attention provided nor for charges incurred from such.

Signature _____

Date _____

For Office Use Only:

Completed:	ENGL	MATH	HS/GED Transcripts Here: Y or N
Needs to Test In:	RDG	WRT MAT	Holds: Y or N
Previous high school student?	YES- code B	NO- code R	
Approved: Y or N	Why _____ (Noted in SPACMNT)		

1st 2nd 3rd

GPA: _____

Entered On: _____

Entered By: _____