



STUDENT ADMISSION FORM

Admissions, Registration and Records Office, 26000 S.E. Stark Street, Gresham, OR 97030

For new students and students returning after four terms or more. Please fill out and return by one of the following ways: fax to 503-491-7388, mail to the address above or bring to the Student Services Office on the Gresham Campus. There is a one-time \$25.00 admission fee assessed at the time of registration for all new students registering for credit courses. If you have taken credit courses at Mt. Hood Community College prior to Summer 2003, you will not be required to pay this fee. For questions, call 503-491-7393.

*Providing your social security number (SSN) is voluntary. If you provide it, Mt. Hood Community College (MHCC) will use your SSN for keeping records, doing research, reporting, extending credit, and collecting debts. MHCC will not use your number to make any decision directly affecting you or any other person. Your SSN will not be given to the general public. If you choose not to provide your SSN, you will not be denied any rights as a student. Please refer to the Disclosure Statement listed on the MHCC Web site at www.mhcc.edu/ssn, which describes how your number will be used. Providing your SSN means that you consent to the use of your number in the manner described.

Returning Students: MHCC ID Number _____

* Social Security Number _____

Name _____
LAST FIRST M.I.

Previous name(s) _____

Address _____ Apt# _____

CITY STATE ZIP

COUNTY (i.e. Multnomah) _____

E-mail _____

MHCC Major _____
(review list on back)

Phone _____ Gender: M F

Racial / Ethnic Information:

(Your response is voluntary)

Do you consider yourself to be Hispanic or Latino:

Yes No

In addition, select one or more of the following racial categories to describe yourself:

-American Indian or Alaskan Native -Asian

-African American or Black -White

- Native Hawaiian or Other Pacific Islander

Date of Birth ____ / ____ / _____

Mother's Maiden Name _____

Residency Status – required for assessing tuition charges.

Will you have lived in Oregon 90 days prior to the 1st day of the term?

-yes -no AND, check one below:

-Permanent resident of Oregon, CA, ID, WA or NV

-Permanent resident outside of Oregon, CA, ID, WA or NV

-International Student (requires an I-20)

-International Visitor (B, J, H or other non-student Visa)

please tell us your Visa type: _____

Term Summer Fall Winter Spring
Year _____

Previous college(s) attended _____

What is your attendance history at MHCC?

-New Student

-Attended MHCC more than four terms ago

What is your current high school education?

(D)-Adult High School Diploma, Yr _____

(G)-GED, Yr _____

(H)-High School Graduate, Yr _____

(N)-Did not complete

(S)-Still in High School

Name of last high school attended _____

State _____

Check here if Home Schooled _____

What is the highest level of education / training you have received beyond high school?

(0)-None

(1)-Some college, short-term training, private vocational school

(2)-1-year certificate from a community college

(3)-2-year degree from a community college

(4)-Bachelor's degree

(5)-Master's degree

(6)-Ph.D. / Professional degree

Do you plan to earn a degree, certificate or diploma at MHCC?

(A)-Yes, a 1-year certificate or 2-year degree

(B)-Yes, High School diploma or GED

(C)-No, here to take classes

(D)-Undecided

Select the one main reason for attending MHCC this term.

(A)-Take classes to transfer to a 4-year college

(B)-Learn skills to get a job

(C)-Improve existing job skills

(D)-Explore career or educational options

(E)-Take classes to finish High School or GED

(F)-Improve reading, writing or math skills

(G)-Learn English

(H)-Personal interest / enrichment

(I)-Other

Will you be employed while attending classes this term?

(F)-Yes, full-time (35+ hours per week)

(P)-Yes, part-time (Less than 35 hours per week)

(N)-No, not employed

Check here if you are a U.S. Veteran:

Yes

"Student Right to Know"

information is available at

<http://www.mhcc.edu/pages/1451.asp>

If you need assistance due to a disability, please contact the Disability Services Office at (503)-491-6923 or at (503)-491-7670 (TDD)

Student Signature _____ Date: _____

Read before submitting: I acknowledge I am legally obligated to pay all charges incurred by registering. Charges may include late fees, reasonable collection costs, attorney fees, and Oregon Department of Revenue charges to the collection of all delinquent debts owed to the college. To have course tuition/fee charges removed, I must process a drop or withdrawal on MyMHCC or through the Admissions, Registration and Records Office within the refund period. (Form Updated: 6/25/2009)