## APPLICATION FOR ADMISSION

Date Employment Started: \_\_\_

Flathead Valley
Community College

The admission deadline for FVCC classes is one week prior to the start of the semester. Running Start and Non-Degree students are not eligible for financial aid.

Main Campus

ve • Kalispell MT 59901 • 406-7

777 Grandview Drive • Kalispell, MT 59901 • 406-756-3846 1-800-313-3822 • www.fvcc.edu • info@fvcc.edu

**Lincoln County Campus** 

225 Commerce Way • Libby, MT 59923 • 406-293-2721

■ The following sections, except Voluntary Statistic	cal Information, n	nust be compl	leted to be accepted.	
☐ DEGREE SEEKING   ☐ READMITTANCE	RUNNING ST	ART	NON-DEGREE	
Campus you plan on attending?	First semeste	er you plan to enro	oll?	
☐ Kalispell ☐ Libby ☐ Online Only	☐ Fall	$\square$ Spring	Summer 20	
Full Legal Name:	Name			
Last Name First	Name		Middle Initial	
Street Address and PO Box Number City		State	Zip Code	
Phone: Text Message Ph	none: Yes No	Cell:		
(Please note: Checking "Yes" to "Text Message Phone" affirms your approval of its				
Email Address:	_			
Social Security Number Birth Date	e:/			
,				
Have you ever taken credit classes at FVCC?   Yes   No	Former N	Name(s):	<del></del>	
U.S. Citizen: Yes No Country of Citizenship:	USC	IS#		
Residency Information				
- Residency information				
Does your parent or legal guardian claim you as a federal income If NO, answer questions below for yourself. If YES, answer questi	· ·			
{ 1 } Montana COUNTY of Residence:	How long?			
If less than 12 months, previous county?				
{ 2 } STATE of Residence:		How long?		
If less than 12 months, previous state?		J		
$\{3\}$ From what state have you filed your most recent income tax?		Tax ye		
From what state is your current driver's license:				
State or county your vehicle is currently registered:		Curre	nt year:	
$\{4\}$ Property owner in Montana? Self - $\square$ Yes $\square$ No/NA Spouse	e - No/NA Pa	arents - 🗌 Yes 🗌 N	Io/NA County:	
{ 5 } Employed in Flathead County full time? Self - ☐ Yes ☐	No/NA Spouse - 🗆 Ye	es 🗆 No/NA   Pa	rents - Yes No/NA	
	No/NA Spouse - TY		arents - Yes No/NA	
Employer:				

Degree Information			
$\{\ 1\ \}$ What degree do you plan to earn?	EVCC		
A.A. A.S. If earning an A.A. or A.S.			
A.A.S. If earning an A.A.S. (care	er and technical) Degree, program name?		
<ul><li>☐ Certificate If earning a certificate, p</li><li>☐ None / Non-degree</li></ul>	rogram name?		
	me of application		
	diploma Year GED/HiSET Year		
$\{3\}$ Name of high school or GED/HiSET center?			
3 - 2	education institutions? 🗆 Yes 🗆 No Degree Earned		
{ 5 } List ALL colleges/universities/vo-techs previously a	ttended. State Date		
	StateDate		
	(If more, attach list)		
■ Safety and Security			
$\left\{ \begin{array}{c} 1 \end{array} ight\}$ Have you ever been convicted of a felony? $\ \ \square$ Yes $\ \ \square$ No	Suspension is defined as a sanction imposed for disciplinary reasons that results in a student leaving school for a fixed time period, less than permanently. Dismissal from a college for disciplinary reasons is defined as permanent separation from an		
$\{2\}$ Have you been otherwise institutionalized for threaten causing physical or emotional injury to persons or pro $\square$ Yes $\square$ No			
Have you ever been required to register as a sexual violent offender?	or Yes No		
☐ Yes ☐ No If you answered "yes" to this question, provide information EVERY such incident.	An affirmative response to any of these questions will not automatically prevent admission, but you will be asked by the college to provide additional information. This information will be reviewed by a campus committee to ensure campus safety.		
■ Voluntary Statistical Information			
Gender: 🗆 Male 🗆 Female			
Have either of your parents (or guardian(s)) with whom you reside completed a bachelor's degree? $\Box$ Yes $\Box$ No $\Box$ Unsure			
Were you in the armed services?  Yes No	Active Duty fromto		
,	City/State entered service		
The U.S. Department of Education, Office for Civil Rights, requires the institution to report aggregate data about the ethnic background of students. The Montana University System also requires the institution to report students ethnic background data for tracking purposes.			
· · · · · · · · · · · · · · · · · · ·	atino: Yes No		
Specify Tr	Indian or Alaskan Native ibal Affiliation and on Black or African American Asian Native Hawaiian or other Pacific Islander Other		
■ Disability Assammadations	— Other ———		
■ Disability Accommodations			
accommodation information will be confidential and used only	that have resulted in limited participation in its education programs. Disability in accordance with federal regulations issued pursuant to Section 504 of the ou would like assistance with an accommodation for a disability please contact		
By turning in this application, the student acknowledges that	I hereby certify, to the best of my knowledge, all the statements		
photo(s)/recording(s) taken of them on campus may be used for on this form are true.			
marketing purposes in any number of communication vehicles for the promotion of the college and releases all rights or claims  Applicant's Signature			
in connection with these photo(s)/recording(s). For furthe information or to opt out, contact the Admissions Office.	Date		