

Northwestern Connecticut Community College

APPLICATION FOR ADMISSION



Park Place East Winsted, CT 06098
www.nwcc.edu
(860) 738-6330

Retain this instruction sheet for your information.

Connecticut State Colleges & Universities
Board of Regents for Higher Education



CONNECTICUT STATE
COLLEGES & UNIVERSITIES
BOARD OF REGENTS FOR HIGHER EDUCATION

Find the student type that best describes you, then follow the easy steps to enroll at NCCC. In order to complete your application file and register for courses, you must submit all required documents.

All students who apply for Financial Aid must complete the admissions process (matriculate into a degree or certificate program)

NEW

First time college student

- Complete the Application for Admissions and submit it with the \$20.00 application fee.
- Submit proof of high school completion or GED completion (submit transcript upon admission followed by a final high school transcript after graduation)
- Submit proof of immunization records for measles, mumps, rubella (MMR), and varicella. (MMR requirement waived if born prior to January 1, 1957. Varicella requirement waived if born prior to January 1, 1980) Immunization form available on NCCC website www.nwcc.edu
- After receipt of your application, information regarding placement testing will be sent to you via email. You may also contact the Admissions Office to schedule a date for placement testing at 860-738-6330. Placement testing is required for all new students prior to enrollment.*
- Sign application in the Three designated areas on page 4 of application.

* Please submit SAT or ACT scores for possible exemption from placement testing.

TRANSFER

Have attended a college other than NCCC prior to enrollment at NCCC

- Complete the Application for Admission and submit it with the \$20.00 application fee. (If you applied to another CT community college, this fee is waived).
- Submit proof of high school completion or GED completion (diploma or transcript).
- Submit proof of immunization records for measles, mumps, rubella (MMR), and varicella. (MMR requirement waived if born prior to January 1, 1957. Varicella requirement waived if born prior to January 1, 1980) Immunization form available on NCCC website www.nwcc.edu
- Submit transcripts of previous course work to determine if the computerized Placement Test can be waived. If you are in a degree/certificate program and are requesting an official transfer evaluation, an official copy must be requested and sent from previous college(s) to NCCC Admissions Office.
- Sign application in the Three designated areas on page 4 of application.

RE-ADMIT

Haven't been back to NCCC in two or more years

- Submit Readmission Application available at the admissions office and online.
- Please call the Admissions Office to verify that we have all the records needed for you to register including:
 - Proof of high school or GED completion
 - Immunization records
 - Placement Test results or completed Math or English courses.

NON-DEGREE

Must be Part time-Not eligible for financial aid

- Complete the Application for Admissions and submit it with the \$20.00 application fee.
- Include unofficial college transcripts (to show that course pre-requisites are met) OR call 860 738-6330 to schedule a placement test.
- Sign application in the Three designated areas on page 4 of application.
- Complete course registration form.
- Submit all documents.
(Fax: 860-738-6437)

STUDENT CREDIT CARD

_____ Visa _____ MasterCard

Number _____

Expiration Date _____ Sec Code _____

Signature _____

Financial Assistance

A diverse financial aid program is available to students who are in need of financial assistance. Financial Aid Office: Telephone: 860-738-6326. Students must apply for Financial Aid online at www.nwcc.edu and click on to the Financial Aid link.

For directions to the college please see our web page at www.nwcc.edu

Office of Admission

Northwestern Connecticut Community College
Park Place East • Winsted, CT 06098-1798
(860) 738-6330
admissions@nwcc.commnet.edu

Veterans

Veterans are encouraged to contact the Veterans Counselor. Waivers of tuition may be available and the Veterans Counselor will assist veterans with the appropriate forms. To expedite the process for applying for benefits, veterans should bring a DD214 (separation papers) to the Veterans Counselor. Telephone: 860-738-6306 or email: spalombizio@nwcc.edu.

Students with Physical and/or Learning Disabilities

It is highly recommended that students with physical and/or learning disabilities contact the Counselor for Students with Disabilities. Telephone: 860-738-6318 or email: cwoodcock@nwcc.edu to discuss information about accommodations.

International Students

International students must apply by June 1 for the fall semester and October 1 for the spring semester. Please refer to the college website for specific requirements.
www.nwcc.edu



APPLICATION for ADMISSION

CONTACT INFORMATION

Legal Last Name		Legal First Name		Middle	Previous Maiden/Last Name	
Social Security Number		(Social security number requested for purposes of financial aid, federal income tax benefits, provision of some college services, accuracy of student records and other business purposes.)			Date of Birth	
					(MM) (DD) (Year)	Gender <input type="checkbox"/> M <input type="checkbox"/> F
Email						
Mailing Address	Number & Street		Apt. #	City		State Zip
	Permanent Address		Apt. #	City		State Zip
Phone Numbers	Cell Phone		Home Phone		Work Phone	
	() -		() -		() -	

ATTENDANCE & APPLYING

Have you previously attended this college?

Yes No

If yes, when?

Have you previously attended a CT Community College?

Yes No

If yes, where?

Are you transferring from another college?

Yes No

For which semester are you applying?

Fall (Aug-Dec)

Spring (Jan-May)

Winter (Dec-Jan)

Summer (May-Aug)

Summer continuing into fall

Year

FAMILY EDUCATIONAL BACKGROUND

Check the category that applies to your parent(s) or guardian(s):

Neither attended college

One or both attended college but did not earn a degree

One or both earned an associate degree

One or both earned a bachelor's degree or higher

ETHNICITY/RACE

This information is requested on a voluntary basis by the U.S. Department of Education, National Center for Education Statistics. Your answer will not affect admission to or registration in the college.

Do you consider yourself to be Hispanic/Latino?

Yes No

What is your race? (Select one or more)

White (10)

American Indian or Alaskan Native (50)

Black or African American (20)

Native Hawaiian or Other Pacific Islander (80)

Asian (45)

CITIZENSHIP

Are you a United States citizen?

Yes No

If no, are you a permanent resident? (green card holder)

Yes No

IN-STATE TUITION

Out-of-state students may be eligible for a reduced tuition rate through the NEBHE program. For details, see the college catalog or website.

1. Are you eligible for in-state tuition because you have continuously resided in Connecticut for at least one year and Connecticut is your permanent home?

Yes No

2. If "No," can you claim and demonstrate through documentation that you are eligible for in-state tuition?

Yes No

3. Check here if applying under the New England Regional Student program (NEBHE).

NEBHE

If you answered "Yes" to question #2 or checked question #3, you must submit a "Declaration of Eligibility for In-State or NEBHE Tuition" for review and determination of eligibility.

MILITARY STATUS

Are you currently on active duty with the U.S. Armed Forces? (ACTD) Yes No

Are you currently a member of the National Guard or Reserve? (NGRE) Yes No

Have you ever served in the U.S. Armed Forces? (VETI) Yes No

Are you a dependent of a member of the U.S. Armed Forces? (VETD) Yes No

If you answered "Yes" to any of these questions, you may be entitled to benefits and should meet with the college's Veterans Certifying Official (VCO).

Received Date ____/____/____

Student Type _____

Application Fee Paid Yes No

Credit/Debit Card

BANNER@ _____

Entered By _____

Cash _____ Check # _____

Admit Type _____

Entered Date ____/____/____

Money Order _____ Waived _____

Exp. Date ____/____/____

FOR OFFICE USE ONLY

EDUCATIONAL GOAL

Check only one

- | | |
|--|--|
| <input type="checkbox"/> Developmental (college prep) education (DV) | <input type="checkbox"/> Earn associate degree, then transfer (DT) |
| <input type="checkbox"/> English skills (ESL) (ES) | <input type="checkbox"/> Personal development course(s) (PD) |
| <input type="checkbox"/> Certificate - undergrad credit (CT) | <input type="checkbox"/> Job preparation/retraining course (JB) |
| <input type="checkbox"/> Fulfill other college's requirement (AC) | <input type="checkbox"/> Job promotion (JP) |
| <input type="checkbox"/> Transfer without an associate degree (DN) | <input type="checkbox"/> Unsure at this time (UN) |
| <input type="checkbox"/> Associate degree (DG) | <input type="checkbox"/> Goal not listed (NL) |

PREVIOUS COLLEGES ATTENDED

College/University Name		State
Dates of Attendance	Graduation Date	Degree Awarded

College/University Name		State
Dates of Attendance	Graduation Date	Degree Awarded

College/University Name		State
Dates of Attendance	Graduation Date	Degree Awarded

INTERNATIONAL STUDENT INFORMATION

Are you an international student who needs an I-20 form for an F1 Visa?

- Yes No

Other Visa Holder (indicate type)	Visa Start Date
Visa Admission Number	Visa End Date
International Address	

COMMUNICATION & CONSENT

Email Communications

I request the college forward me any initial correspondence to the email address I have provided, including personally identifiable information pertaining to me from college records protected by FERPA.

Consent for the Disclosure of Education Records

I understand that to maintain accurate student records, including the records pertaining to my attendance at the college, and for other necessary business purposes, the college may need to release or provide access to personally identifiable information in its records pertaining to me to another college in the CT Community College System or to the system's administrative office. Accordingly, I hereby authorize the college to release or allow access to such information to those indicated for the purposes described.

Signature

INTENDED PROGRAM OF STUDY

In which degree/certificate program do you plan to enroll? (use attached list)

Primary Major	Code
Secondary Major (optional)	Code

HIGHEST EDUCATIONAL LEVEL ACHIEVED

Check only one

- | | |
|---|--|
| <input type="checkbox"/> No high school diploma or GED (01) | <input type="checkbox"/> Master's degree (09) |
| <input type="checkbox"/> High school diploma or GED (02) | <input type="checkbox"/> Other advanced degree (10) |
| <input type="checkbox"/> Some college (06) | <input type="checkbox"/> Doctoral degree (11) |
| <input type="checkbox"/> Undergraduate certificate (05) | <input type="checkbox"/> First professional degree (JD, MD, DDS, LLB) (12) |
| <input type="checkbox"/> Associate degree (07) | <input type="checkbox"/> Sixth-Year certificate (13) |
| <input type="checkbox"/> Bachelor's degree (08) | |

ACADEMIC BACKGROUND

Do you have a high school diploma?

- Yes No Pending

Name of High School	
City/State	Country

Have you passed the high school equivalency exam GED, TASC, HISET? (070997)

- Yes No

Year	Town/State
------	------------

Are you a home school graduate? (100001)

- Yes No

Grad Year	Town/State
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Please submit a copy of your final official high school transcript or equivalency credential.

Have you participated in the High School Partnership Program through the CT Community Colleges?

- Yes No

Have you taken courses at your high school and earned college credit? (concurrent enrollment)

- Yes No

Signature

I certify with my signature below that I am the applicant and that the information I have provided above is accurate. If admitted, I pledge to comply in good faith with all the rules and regulations of the college. I realize that any misleading information provided by me on this application may be cause for dismissal. I understand that information collected in this application is for reporting purposes only and will not be used in the selection process for admission.

Signature	Date
Parent/Guardian Signature (if under 18)	Date