APPLICATION FOR ADMISSION

Apply for Admissions On-line:  www.southernwv.edu

It is the policy of Southern West Virginia Community and Technical College to provide equal opportunities to all prospective and current members of the student body, faculty, and staff on the basis of individual qualifications and merit without regard to race, sex, religion, age, or national origin.
Please provide the following information to your campus records office within 30 days. All submitted documents must contain your name and Social Security number.

The following item(s) are required to complete your file:

____ Early Entry Students’ HS Transcript
____ Early Entry Form for High School Students
____ FINAL High School Transcript (after graduation)
____ GED Scores
____ Immunization (shot) Records-Measles, Mumps, Rubella (MMR)
____ OFFICIAL College/University transcript from [Official transcripts must be issued to Southern, not the student]
____ Transient Form

Send form to:

Boone Records Office
Southern WV Community and Technical College
3505 Daniel Boone Parkway
Danville WV 25053
304.307.0703
TTY 304.369.2960

Logan Records Office
Southern WV Community and Technical College
PO Box 2900
Mt Gay WV 25637
304.896.7348
TTY 304.792.7054

Williamson Records Office
Southern WV Community and Technical College
Armony Drive
Williamson WV 25661
304.236.7636
TTY 304.235.6056

Wyoming Records Office
Southern WV Community and Technical College
PO Box 638
Pineville WV 24874
304.294.2001
TTY 304.294.8520

Use the information below to complete the Application for Admission

Enrollment: Full-time is 12 credit hours or more during the fall or spring term and 6 credit hours during summer term. Part-time is any number of credit hours less than 12 for the fall or spring term or less than six for the summer term.

Student Type: Select one term to complete this category.

1st Time Freshman: A student who has not previously attended any college after graduating high school

High School Student: A student taking classes while currently enrolled in high school

Transfer: A student who has attended another accredited institution

Transient/Visiting: A student who is regularly enrolled and in good standing at an institution other than Southern and is taking a course(s) at Southern which is intended to be transferred to the regular institution toward a degree from that school

Non-Degree: A student taking classes for credit, but not working on a degree

Re-admission: A student who has previously been admitted to Southern, but has not attended any other institution and did not attend Southern during the previous regular semester

High School/GED: List the name and location of the high school you attended or are attending. If you took the GED, list the name of the test center and your exam date

MAJORS

DIVISION OF UNIVERSITY TRANSFER PROGRAMS: A.A. and A.S. Degree

ASSOCIATE IN ARTS

ASSOCIATE IN SCIENCE

DIVISION OF CAREER AND TECHNICAL PROGRAMS: A.A.S and Certificate

ASSOCIATE IN APPLIED SCIENCE

Departments of Allied Health and Nursing:
- Dental Hygiene
- Health Care Professional
- Medical Laboratory Technology
- Nursing
- Radiologic Technology
- Respiratory Care Technology
- Salon Management/Cosmetology
- Surgical Technology

Departments of Business and Criminal Justice:
- Accounting
- Business Administration
- Mine Management
- Office Administration
- Criminal Justice
  - Corrections Option
  - Law Enforcement Option

Department of Humanities:
- Early Childhood Education

Department of Technology:
- Electrical Engineering Technology
- Information Technology
- Survey Technology
- Technical Studies- Applied Technology

Non-Traditional Programs:
- Occupational Development
- Firefighter
- Child Development Specialist
- Board of Governors

CERTIFICATE

Department of Allied Health and Nursing:
- Medical Lab Assistant
- Sterile Processing Technician
- Electrocardiology

Department of Business and Criminal Justice:
- Office Administration
- Criminal Justice

Department of Technology:
- Electrical Engineering Technology
- Information Technology
- Survey Technology
- Technical Studies- Applied Technology

NOTE: Admission to Southern does not guarantee admission to Allied Health or certain Technology/Engineering programs. Please request specific information about these programs by contacting your advisor.
Application for Admission
Southern West Virginia Community and Technical College

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<tr>
<th>Social Security Number</th>
<th>Last Name</th>
<th>First Name</th>
<th>Middle Initial</th>
<th>Preferred First Name</th>
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Other name(s) under which you have attended Southern

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<tr>
<th>Email Address</th>
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Mailing Address

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip</th>
<th>County</th>
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<th>Home Telephone Number</th>
<th>Business Telephone Number</th>
<th>Cell Phone Number</th>
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Emergency Contact:

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<tr>
<th>Last Name</th>
<th>First Name</th>
<th>Address</th>
<th>Relationship</th>
<th>Telephone Number</th>
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Are you a US Citizen?  [ ] Yes  [ ] No

Under new Immigration and Naturalization Services rules, Southern is not an institution certified to receive international students.

Disclosure of additional personal data is for statistical purposes and will in no way affect a decision concerning your application.

[ ] Male  [ ] Female  [ ] Widowed  [ ] Divorced  Birthdate: _______/______/______

[ ] Married  Birthplace(state): ____________________

[ ] White  [ ] Hispanic of any race

Ethnic Status: [ ] African American/Black  [ ] Asian

[ ] American Indian/Alaskan  [ ] Native Hawaiian/other Pacific Islander

[ ] Two or more races  [ ] Other

Have you or will you be applying for financial aid?  [ ] Yes  [ ] No

Will you be applying for VA benefits?  [ ] Yes  [ ] No

Have you ever served in the Armed Forces of the United States?  [ ] Yes  [ ] No

If you are a male between the ages of 18 and 25, have you registered with the Selective Service?  [ ] Yes  [ ] No

Enrollment:  [ ] Full-Time  [ ] Part-Time

What Term and Year do you wish to enroll? *(Please check one term below)*

Term:  [ ] Fall (August)  [ ] Spring (January)  [ ] Summer  Year: _________
Residency:
[ ] West Virginia    [ ] Out of State    [ ] Reciprocity KY (Martin & Pike Counties, only)

Length of Residency:_______ Years                 Less than 1-year, specify number of months: ________

See page two for directions to complete Student Type and Major

Student Type:
[ ] 1st Time Freshman    [ ] Transfer    [ ] Non-Degree Seeking
[ ] High School Student    [ ] Transient/Visiting    [ ] Re-admission

Major:_______________________    Level: [ ] 1-year Certificate [ ] 2-year Associate
(See page two for list of majors)

Check all that apply: My Educational Goal is to:
[ ] Obtain an Associate Degree    [ ] Transfer to a 4-yr College/University
[ ] Get a Certificate    [ ] Take a Few Classes
[ ] Improve Skills as Required for Job    [ ] Other______________________________

Has either of your parents received a four-year college undergraduate degree?  [ ] Yes  [ ] No

<table>
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<tr>
<th>High School Name OR GED Center</th>
<th>City</th>
<th>State</th>
<th>Zip</th>
<th>Grad Date</th>
<th>GED Test Date</th>
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High school students with college credit and transfer students must complete this section.

Have you been or are you presently enrolled in any college or university?
[ ] Yes  [ ] No

Have you been suspended or expelled for academic or disciplinary reasons?
[ ] Yes  [ ] No

If so, are you currently eligible to return to that institution?
[ ] Yes  [ ] No

Briefly explain the nature of suspension or expulsion

List All Colleges/Universities You Have Attended and the Hours/Degree Earned

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<tr>
<th>School Name</th>
<th>Location</th>
<th>From (month/yr)</th>
<th>To (month/yr)</th>
<th>Hours/Degree</th>
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Students who have previously attended other institutions must have an official transcript from each school sent to the Admissions Office. Incomplete information may result in disciplinary action or denial of admission.

I certify that all statements in this application are complete and true and I give the aforementioned institution permission to use this information for statistical and reporting purposes. I further understand that any willful misrepresentation of information given in this application may be grounds for denial of my admission or dismissal.

______________________________  _______________________
Signature                        Date

Students seeking accommodations for disability should contact the Disability Services Office at 304.896.7315, or TTY 304.792.7054.

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