

Please type or print clearly:

Program Applying for: \_\_\_\_\_ Campus: \_\_\_\_\_

Program Start Date: \_\_\_\_\_ Educational Goals: \_\_\_\_\_

**PERSONAL INFORMATION**

Legal Name (enter name below exactly as it appears on official documents):

\_\_\_\_\_  
 Last Name First Name Middle Suffix (Jr., Sr., etc.)

\_\_\_\_\_  
 Preferred Name Previous Last Names (if any)

\_\_\_\_\_  
 Date of Birth (mm/dd/yyyy) Gender (M/F) Social Security Number (Optional)\*  
 Please do not include if emailing the application.

\_\_\_\_\_  
 Email Address Mobile Phone Number  
 Would you like to receive text messages from West-MEC? YES NO

\_\_\_\_\_  
 Mailing Address Apt. # City State Zip

Do you give permission to West-MEC to release directory information relative to your enrollment (per the Family Education Rights and Privacy Act of 1974)? YES NO

**IN CASE OF EMERGENCY, Please contact:**

\_\_\_\_\_  
 Name Relationship Phone

\_\_\_\_\_  
 Address Apt. # City State Zip

\_\_\_\_\_  
 Name Relationship Phone

\_\_\_\_\_  
 Address Apt. # City State Zip

**ETHNICITY (optional)\*\***

<input type="checkbox"/>	Asian	<input type="checkbox"/>	Native Hawaiian/Pacific Islander
<input type="checkbox"/>	Black or African American	<input type="checkbox"/>	White
<input type="checkbox"/>	Hispanic	<input type="checkbox"/>	American Indian or Alaska Native

**ACADEMIC INFORMATION**

Name of High School Graduated From \_\_\_\_\_

School City \_\_\_\_\_

School State and School Zip Code \_\_\_\_\_

Date of Graduation (mm/yyyy) \_\_\_\_\_

Are you currently enrolled in high school? YES NO

Did you receive a GED? YES NO

\_\_\_\_\_  
 If yes, list date (mm/yyyy) & please submit a copy of official test scores.

Is this your first time enrolling in college? YES NO

**CITIZENSHIP STATUS**

<input type="checkbox"/>	United States Citizen
<input type="checkbox"/>	Legal Immigrant/Permanent Resident Alien Registration #:
<input type="checkbox"/>	Lawful Refugee Alien Registration #:
<input type="checkbox"/>	Other:

**MILITARY**

Are you a veteran of the U.S. Armed Forces?	Yes	No
If so, are you eligible for benefits?	Yes	No
Are you currently serving in the U.S. Armed Forces?	Yes	No
If so, are you eligible for benefits?	Yes	No

**FUNDING SOURCE(S) check all that apply:**

<input type="checkbox"/>	Federal Financial Aid (Grants/Loans)
<input type="checkbox"/>	Agency Funding - Include name of agency, contact name and phone #: _____
<input type="checkbox"/>	Veteran Benefits
<input type="checkbox"/>	Cash/Payment Plan

**FELONY INFORMATION**

Other than traffic offenses, have you ever been convicted of any misdemeanor, felony, or other crime? YES NO

If you answered yes, please provide an explanation and approximate dates of each incident: \_\_\_\_\_  
\_\_\_\_\_

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**STUDENT SIGNATURE**

I certify that the data on this Student Information Form is true, correct, and complete. I understand that I am responsible for any expenses incurred at West-MEC in the event that I am unable to obtain enough financial resources to cover my educational cost.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**SCHEDULE A CAMPUS/PROGRAM TOUR:**

- ❖ For campus tours, please contact [adulthood@west-mec.org](mailto:adulthood@west-mec.org) or 623-738-0046.

Student met with \_\_\_\_\_ on \_\_\_\_\_.

\_\_\_\_\_  
Adult Ed. Coordinator, Campus Administrator, or Designee Signature Date

**NEXT STEPS:**

1. Once a tour is completed, please call the Adult Education Registrar at 623-772-4236 to schedule an appointment to complete the following enrollment documents: Enrollment Acknowledgement and Payment Plan.
  - a. Please bring the following with you to the appointment:
    - i. Photo ID and
    - ii. Official High School Diploma or GED (or request the official high school or GED transcript to be sent to: West-MEC (attention Adult Education Registrar) 5487 N. 99<sup>th</sup> Avenue, Glendale, AZ 85305).
2. Pay the program deposit to secure your seat in the program.

All information on this form is confidential and in compliance with the Family Education Rights and Privacy Act of 1974 (FERPA). FERPA's provisions are explained in the West-MEC Adult Programs Catalog and Student Handbook.

\*Your Social Security Number (SSN) will not be used as your primary Student identification number and will be kept confidential. Providing an SSN will ensure that your educational records are complete and correct and will allow the fullest services. Students should be aware that a correct SSN must be on file for reporting information pertaining to potential tax credits and must be used by applicants for Federal Student Aid and GI Bill Education Benefits. Your SSN will be utilized for purposes of requesting transcripts both official and unofficial.

\*\*Voluntary information used to comply with federal reporting has no effect on admission to West-MEC.

West-MEC District #402 does not discriminate on the basis of race, color, gender, national origin, disability, religion or age in its programs, services or activities. Compliance: Title IX, Title VI, Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act of 1990, Drug-Free Workplace Act of 1988. For information regarding discrimination grievance or complaint procedures, call 623.772.4236.