



PERSONAL AND DEMOGRAPHIC INFORMATION

What term do you intend to begin taking courses? Term (check only one): FALL SPRING 20 YEAR

Full Legal Name FIRST NAME MIDDLE NAME FAMILY NAME

Date of Birth (MM/DD/YYYY) Gender (check one) Male Female

Country of Birth Country of Citizenship

(Foreign) Permanent Street Address

(Foreign) CITY STATE PROVINCE COUNTRY

(USA) Permanent Street Address STREET CITY STATE ZIP

(USA) Home Phone E-mail

What is your first language?

Will you be requesting an INS form I-20 for and F-1 student visa or to continue in F-1 status? Yes No

Will a spouse or dependent child(ren) accompany you on your visa? Yes No

If yes, attach a list indicating each person's full name, place and date of birth and relationship to you.

If you are already in the United States, please answer the following questions:

What type of visa do you have? If you have a F-1 visa, what date did you enter the U.S.?

Please specify the SEVIS I.D. number What institution issued the Form 1-20 SEVIS?

Social Security number (*optional) Applied for permanent resident/political asylum? Yes No

*Providing your Social Security number is voluntary. However, your Social Security number helps ensure positive identification of your records.

What is your admission I-94 number? When does your visa expire?

I certify that all the information is true and complete to the best of my knowledge:

Student signature Date

NOTE: Normandale Community College is asking you to provide data that includes private and confidential information under state and federal law. The college is asking for this information in order to process your application. You are not legally required to provide the information the college is requesting, however, the college may not be able to effectively process your application if you do not provide sufficient information. With some exceptions, unless you consent to further release of private information, access to this information will be limited to school officials who have legitimate educational interests. Under certain circumstances federal and state laws authorize release of private information without your consent:
• To other schools in which you seek or intend to enroll, or are enrolled, if you are first notified of the release;
• To federal, state or local officials for purposes of program compliance, audit or evaluation;
• As appropriate in connection with your application for, or receipt of, financial aid;
• If the information is sought with a subpoena, court order or otherwise permitted by other state or federal law;
• To an organization engaged in educational research or an accrediting agency

RELEASE OF INFORMATION

Normandale Community College complies with the U.S. privacy laws and regulations. This means that once application materials are submitted to the college, only you, the student and the college officials may view the material. No one else may obtain information from your file unless you give the college written permission. If you want the college to give information to someone that will be assisting you with your admissions, you must complete the following. The name of the person who has your permission must be written below.

I give the college permission to obtain my personal information and to release the indicated information to the following person (Mark all that apply): Status of file Admission

Full Legal Name FIRST NAME MIDDLE NAME FAMILY NAME PHONE

(USA) Permanent Street Address STREET CITY STATE ZIP



EDUCATIONAL INTEREST

Have you attended any school since high school? Yes No

List attendance at all secondary and post-secondary schools below and request that an official transcript is sent to the Normandale Office of Admissions from each school listed. The official transcript must be in English and clearly show the student's current name.

Secondary Schools/High School, Colleges, Technical or other Post-Secondary schools	City, State	Country	Dates		Certificate, Degree or Diploma Received
			Started	Ended	

IMPACT OF A CRIMINAL RECORD

If you have been arrested, charged or convicted of any criminal offense, you should investigate the impact the arrest, charge or conviction may have on your ability to obtain employment in the field you intend to study or the impact it may have on your chance to receive federal, state and other higher education financial aid.

SELECT A DEGREE

What is your education intent at Normandale Community College?

- Earn an associate (2-yr) degree Earn an associate (2-yr) degree and transfer Complete courses and transfer without a degree

What is your major at Normandale?

Students taking General Education courses without a specific major should select the General Education/Transfer - AA.

- | | |
|---|---|
| <input type="checkbox"/> Accounting - Cert | <input type="checkbox"/> German – AA Emphasis |
| <input type="checkbox"/> Accounting – AS Transfer Pathway | <input type="checkbox"/> Health Sciences Broad Field - AS |
| <input type="checkbox"/> Anthropology – AA Emphasis | <input type="checkbox"/> Healthcare Systems Technology - AS |
| <input type="checkbox"/> Archaeology – AA Emphasis | <input type="checkbox"/> History – AA Transfer Pathway |
| <input type="checkbox"/> Art – AA Emphasis | <input type="checkbox"/> Hospitality Mgmt - AAS |
| <input type="checkbox"/> Art – AFA Transfer Pathway | <input type="checkbox"/> Individualized Studies - AAS |
| <input type="checkbox"/> Biology – AS Transfer Pathway | <input type="checkbox"/> Law Enforcement – AS Transfer Pathway |
| <input type="checkbox"/> Business – AS Transfer Pathway | <input type="checkbox"/> Literary Studies – AA Emphasis |
| <input type="checkbox"/> Business-Marketing & Mgmt - AAS | <input type="checkbox"/> Mathematics – AA Transfer Pathway |
| <input type="checkbox"/> Chemistry - AS Transfer Pathway | <input type="checkbox"/> Mathematics, Applied - AS |
| <input type="checkbox"/> Communication – AA Transfer Pathway | <input type="checkbox"/> Music - AFA |
| <input type="checkbox"/> Community Health Ed - AS | <input type="checkbox"/> Nursing - AS |
| <input type="checkbox"/> Computer Info Management - AAS | <input type="checkbox"/> Philosophy – AA Emphasis |
| <input type="checkbox"/> Computer Science – AS Transfer Pathway | <input type="checkbox"/> Photography – AA Emphasis |
| <input type="checkbox"/> Computer Technology - AAS | <input type="checkbox"/> Physics – AA Emphasis |
| <input type="checkbox"/> Creative Writing - AFA | <input type="checkbox"/> Political Science – AA Transfer Pathway |
| <input type="checkbox"/> Criminal Justice – AS Transfer Pathway | <input type="checkbox"/> Psychology – AA Transfer Pathways |
| <input type="checkbox"/> Data Analytics - AS | <input type="checkbox"/> Sociology – AA Transfer Pathway |
| <input type="checkbox"/> Dental Hygiene - AS | <input type="checkbox"/> Spanish – AA Transfer Pathway |
| <input type="checkbox"/> Dietetic Technology - AAS | <input type="checkbox"/> Special Education – AS Transfer Pathway |
| <input type="checkbox"/> Economics – AA Transfer Pathway | <input type="checkbox"/> Theatre Performance – AFA Transfer Pathway |
| <input type="checkbox"/> Elementary Ed Fndn – AS Transfer Pathway | <input type="checkbox"/> Theatre Production & Design – AFA Transfer Pathway |
| <input type="checkbox"/> Engineering Broad Field - AS | <input type="checkbox"/> Undecided/Exploring |
| <input type="checkbox"/> Exercise Science – AS Transfer Pathway | <input type="checkbox"/> Vacuum & Thin Film Technology - AAS |
| <input type="checkbox"/> Food Science - AS | <input type="checkbox"/> Vacuum Maintenance Technician - AAS |
| <input type="checkbox"/> French – AA Emphasis | <input type="checkbox"/> Women's Studies – AA Emphasis |
| <input type="checkbox"/> General Education/Transfer | |
| <input type="checkbox"/> Geography – AA Emphasis | |

DEMOGRAPHIC INFORMATION

Providing the following demographic information is voluntary. This information will assist the Minnesota State Colleges and Universities in evaluating student recruitment and retention policies. Information provided will not be used as a basis for admission.

Gender (please indicate) Male Female

Race and ethnic background (select any that apply):

- Are you Hispanic or Latino - A person of Cuban, Mexican, Chicano, Puerto Rican, South or Central American, or other Spanish culture, regardless of race. _____Yes _____No
- American Indian or Alaskan Native - A person having origins in any of the original peoples of North, Central or South America and who maintains tribal affiliation or community attachment.
- Asian - A person having origins in any of the original peoples of the Far East, Southeast Asia or the Indian subcontinent.
- Black or African American - A person having origins in any of the black racial groups of Africa.
- Native Hawaiian or Other Pacific Islander - A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- White - A person having origins in any of the original peoples of Europe, the Middle East or North Africa.

What is the highest level of education for your parent(s) and/or guardian(s)? Please respond for the primary parent(s), step-parent(s), adoptive parent(s) or guardian(s) who raised you. Check only one box for each parent/guardian.

Parent/Guardian	#1	#2
No high school diploma	<input type="checkbox"/>	<input type="checkbox"/>
High school diploma	<input type="checkbox"/>	<input type="checkbox"/>
Some college	<input type="checkbox"/>	<input type="checkbox"/>
Two-year college degree/diploma	<input type="checkbox"/>	<input type="checkbox"/>
Bachelor's degree or higher	<input type="checkbox"/>	<input type="checkbox"/>
Not sure/don't know	<input type="checkbox"/>	<input type="checkbox"/>

IMMUNIZATION INFORMATION

Minnesota Law requires that all students born after 1956 be immunized against diphtheria, tetanus, measles, mumps and rubella.

Enter the month and year of the most recent booster for all doses of vaccine for measles, mumps and rubella that were given after 12 months of age.

___/___ Measles, (rubella, red measles) ___/___ Mumps

___/___ Rubella, (German measles) ___/___ Tetanus/Diphtheria (Td)