

# Trinity Valley Community College

## APPLICATION FOR ADMISSION

Tuition Status			
1	2	3	
4	5	6	7

### Please Print Clearly

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Name \_\_\_\_\_  
Last First Middle

Other last names that your records may be listed under \_\_\_\_\_

Permanent Address \_\_\_\_\_  
Street - Route - Box City

County State/Country Zip Phone ( ) \_\_\_\_\_

How long have you lived at the above address: \_\_\_\_ Years \_\_\_\_ Months

If less than 1 year, give previous address \_\_\_\_\_  
City State

Are you a U.S. Citizen?  Yes  No

*This information is used for statistical purposes only and to provide information required by the Federal Government.  
You are not required to answer these questions to gain admission; however, an answer would be appreciated.*

Male  Female Birthdate: Month \_\_\_\_\_ / Day \_\_\_\_\_ / Year \_\_\_\_\_

**Ethnic Origin:** (Please check one):  White, not of Hispanic origin  Asian or Pacific Islander  Black, not of Hispanic origin  
 Hispanic  American Indian/Alaskan Native  Non-resident alien

## EDUCATIONAL HISTORY

Highest degree you currently hold:  None  GED (when) \_\_\_\_\_ (where) \_\_\_\_\_  
 High School Diploma  Associate Degree  Certificate of Completion  Baccalaureate  
 Other (specify) \_\_\_\_\_

If you have attended college, indicate the first semester and year you attended:  Fall  Spring  Summer Year \_\_\_\_\_

Did you (or will you) graduate from high school?  Yes  No When? \_\_\_\_\_  
Month/Year

Name of high school \_\_\_\_\_

Location of high school \_\_\_\_\_  
City County State/Country

When do you plan to enroll at TVCC? Semester:  Fall  Spring  Summer Year \_\_\_\_\_

Have you attended TVCC or HCJC previously for college credit?  Yes  No

Last semester enrolled at TVCC or HCJC: Semester \_\_\_\_ Year \_\_\_\_ Under what name? \_\_\_\_\_

List all colleges attended in order of most recent attendance: Last Date Total Semester  
School Name City State Attended Hours Accumulated

School Name	City	State	Last Date Attended	Total Semester Hours Accumulated

**NOTE: An official transcript from each college attended must be submitted. If you have not attended college, you must submit a High School or GED transcript.**

**PLEASE COMPLETE OTHER SIDE OF APPLICATION**

# **TASP** (Texas Academic Skills Program - mandated by the Texas State Legislature)

1. Have you registered to take the TASP test?  Yes  No Date of Test \_\_\_\_\_
2. Have you taken the TASP test?  Yes  No Were the scores sent to TVCC?  Yes  No
3. If you are TASP exempt, you must provide official documentation of exemption with this application.
4. Are you in a TASP waived certificate program?  Yes  No If yes, indicate program \_\_\_\_\_

Have either of your parents graduated from a 4-year college?  Yes  No

Do you anticipate graduation from TVCC at any time in the future?  Yes  No

What is your educational goal at TVCC?  Associate Degree  Transfer Courses Only  Certificate  
 Improving Job Skills  Personal Interest  Job Preparation

How long do you plan to attend TVCC in order to accomplish your educational goal?

One Semester  Two Semesters  Three Semesters  Four Semesters  More Than Four Semesters

## **EMERGENCY INFORMATION**

In case of emergency, contact: \_\_\_\_\_

Address \_\_\_\_\_  
Street - Route - Box City State Zip

Home Phone (\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_

## **DECLARATION OF RESIDENCE**

The responsibility for registering under the proper residence classification is placed upon the student. Failure to pay non-resident fees when they apply may result in a penalty in addition to the non-resident fees.

A student is deemed to be a non-resident of Texas if (1) under eighteen years of age and his/her family resides in another state/country, (2) under eighteen years of age and his/her family has not resided in Texas for the twelve months immediately preceding the date of enrollment, or (3) eighteen years of age and over and resides out of the state or has come from outside of Texas or registers in an educational institution before having resided in Texas for a twelve-month period.

This is to certify that I have read the above paragraph, and affirm by my signature below that:

My legal residence is \_\_\_\_\_  
City County State/Country

## **TEXAS RESIDENT OATH OF RESIDENCY: (To be completed by Texas residents only.)**

I understand the requirements for classification as a resident of Texas for tuition purposes and I affirm by my signature below that to the best of my knowledge and belief I am eligible to be so classified. I also affirm that I will notify the Registrar's Office at Trinity Valley Community College if circumstances change so as to disqualify me for this classification. I understand that violation of this oath of residency will result in disciplinary action. I also understand that documentation to support my claim as a resident of Texas is required and hereby agree to provide the required documentation upon request of college personnel.

Date \_\_\_\_\_ Signature \_\_\_\_\_

If accepted for admission, I hereby agree to abide by all rules and regulations of TVCC and certify that all information provided in this application is true and correct. I understand that information submitted will be relied upon by College officials to determine my status for admission and residency eligibility. I authorize the College to verify the information I have provided.

Date \_\_\_\_\_ Signature \_\_\_\_\_

Please forward your completed application and supporting documentation to:

**REGISTRAR**  
**Trinity Valley Community College**  
**500 S. Prairieville**  
**Athens, TX 75751**

*TVCC is an affirmative action/equal opportunity institution which provides educational and employment opportunities on the basis of merit and without discrimination or harassment because of race, color, religion, sex, age, national origin or disability.*