To apply for admission submit the following:
1. This application form properly completed.
2. A non-refundable application fee of $35.00.
3. An official copy of your high school transcript or a copy of your GED certificate.
4. Official copies of college transcripts from all previously attended colleges.

OFFICE USE ONLY:
ID# _____
ADM _____
CODE _____
APPL. FEE PAID _____

APPLICATION FOR ADMISSION

STATUS: _____ Freshman (never attended college) _____ Transfer (attended another college) _____ Returning (attended Humphreys College)

QUARTER OF ENROLLMENT _____ Fall _____ Spring _____ Winter _____ Summer

YEAR: _____ 2008 ~ 2009 _____ 2009 ~ 2010

CAMPUS: ___ Stockton ___Modesto

GENDER: ___ Female ___Male

NAME: _____
LAST FIRST MIDDLE MAIDEN

HOME ADDRESS: _____
NUMBER & STREET CITY STATE ZIP CODE

HOME PHONE: _____ **WORK PHONE:** _____ **CELL PHONE:** _____

EMAIL: _____ **DRIVER'S LICENSE #** _____

ARE YOU A VETERAN? _____ **BIRTHDATE:** _____ **SOCIAL SECURITY #** _____

ARE YOU A U.S. CITIZEN OR PERMANENT RESIDENT OF THE U.S.? _____U.S. citizen _____Eligible non-citizen _____Not a citizen or eligible non-citizen

ALIEN REGISTRATION NUMBER: A_____

ETHNIC ORIGIN: _____African-American/Black _____Hispanic/Latino ____Native American _____Pacific Islander _____Asian _____White/Caucasian ____Other

HOW DID YOU HEAR ABOUT HUMPHREYS COLLEGE? _____

1st DEGREE OBJECTIVE: ___ Certificate ___ A.A. ___ A.S. ___ B.A. ___ B.S. ___ Non-Degree

PROPOSED MAJOR: _____

2ND DEGREE OBJECTIVE: ___ Certificate ___ A.A. ___ A.S. ___ B.A. ___ B.S. ___ Non-Degree

PROPOSED MAJOR: _____

IN CASE OF EMERGENCY, PLEASE NOTIFY: _____
NAME PHONE

HOW WILL YOU PAY FOR YOUR TUITION? ___ Financial Aid ___ V.A. ___ Self ___ Employer ___ Voc. Rehab.

CHARACTER REFERENCES: (not relatives)

NAME ADDRESS CITY STATE ZIP CODE PHONE

NAME ADDRESS CITY STATE ZIP CODE PHONE

CURRENT OR LAST EMPLOYER: _____
NAME CITY STATE ZIP CODE PHONE

PREVIOUS EDUCATION:

HIGH SCHOOL CITY STATE DATES OF ATTENDANCE DIPLOMA OR G.E.D. RECEIVED

COLLEGE CITY STATE DATES OF ATTENDANCE DIPLOMA OR G.E.D. RECEIVED

COLLEGE CITY STATE DATES OF ATTENDANCE DIPLOMA OR G.E.D. RECEIVED

I certify that the information on this application is complete and correct to the best of my knowledge.

Signature of Applicant **Date** **Signature of parent or legal guardian, if applicant is under 18 years of age** **Date**

Humphreys College admits students regardless of sex, race, color, religion, national or ethnic origin, handicap, marital status, sexual preference, physical appearance or age. Rev. 2/08

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