

Coast Community College District



## Application

Semester for which you are seeking admission:  Fall  Spring Year \_\_\_\_\_

Initial College Preference:  No preference  Coastline Community College  
 Golden West College  Orange Coast College

### General Information

- Name: Family/Last Name \_\_\_\_\_ First Name \_\_\_\_\_  
Middle Name \_\_\_\_\_
- Date of Birth: \_\_\_\_\_  
Month Day Year
- Country of Birth \_\_\_\_\_ Age \_\_\_\_\_ Gender: \_\_\_\_\_
- Country of Citizenship \_\_\_\_\_ Primary Language \_\_\_\_\_
- Permanent Home Address (P.O. Box not accepted):  
\_\_\_\_\_  
\_\_\_\_\_
- Phone Number (including country and city code) \_\_\_\_\_
- Email \_\_\_\_\_
- Address in the U.S.A.(if applicable) \_\_\_\_\_  
\_\_\_\_\_  
Phone Number in U.S.A. \_\_\_\_\_
- Where the I-20 and acceptance material should be mailed?  
 Home Address  U.S.A. Address  
 Other Address \_\_\_\_\_
- Do you have disabilities:  
 Health Impairment  Hearing Disability  Learning Disabilities

- Severe Visual Impairment  Speech Disability  Mobility Disability

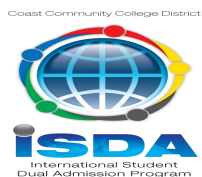
- Do you have a dependent spouse or child who will accompany you?  
 Yes  No If yes, please submit a copy of passport and proof of relationship and fill out the information below:

1. Family Name \_\_\_\_\_ First Name \_\_\_\_\_  
Relationship to Student \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
  Month                          Day                          Year  
Country of Citizenship \_\_\_\_\_  
Country of Birth \_\_\_\_\_

2. Family Name \_\_\_\_\_ First Name \_\_\_\_\_  
Relationship to Student \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
  Month                          Day                          Year  
Country of Citizenship \_\_\_\_\_  
Country of Birth \_\_\_\_\_

**Education Information**

- High School Education:  
Name of high school attended \_\_\_\_\_  
High school graduation date or expected date of graduation:  
\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
  Month                          Day                          Year
- Academic Major \_\_\_\_\_
- List any school (college, university or ESL language program) you may have attended in the U.S. (most recent first)  
1. School \_\_\_\_\_ City/State \_\_\_\_\_  
From \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ To \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
  Month                          Day                          Year                          Month                          Day                          Year  
2. School \_\_\_\_\_ City/State \_\_\_\_\_  
From \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ To \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
  Month                          Day                          Year                          Month                          Day                          Year



## Application Fee

- Application Fee \$30.00
- If you wish to pay your application fee with a credit card, please fill out the authorization statement below:  
 Credit Card Holder's Family/Last Name \_\_\_\_\_ First Name \_\_\_\_\_  
 Billing Address: \_\_\_\_\_  
 Telephone Number \_\_\_\_\_  
 Credit Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_  
 Credit Card Type:  Visa     Master Card  
 Authorized Card Holder's Signature \_\_\_\_\_ Date \_\_\_\_\_

## Student Release Information

If you would like to give permission to a college within CCCD in which you will enroll to release your information including release of your records and documentation to a third party, please indicate their names below:

Family/Last Name \_\_\_\_\_ First Name \_\_\_\_\_  
 Relationship to the student \_\_\_\_\_

## How did you find out about CCCD Dual Admission Program

- Recruiter (name) \_\_\_\_\_
- Friend/Relative
- Student Fair
- Education Agency (Name) \_\_\_\_\_
- Advertisement (Publication Name) \_\_\_\_\_
- Overseas Advising Center (location) \_\_\_\_\_
- Internet (name of site) \_\_\_\_\_

## Certification

I certify that I have carefully reviewed each question above and that my statements are true and complete to the best of my knowledge.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

