

Admission Application

Important Admissions Information: All students begin the admissions process in the Enrollment

Services Center, 281.756.3531 (voice), 281.756.5812 (fax). Proof of TSI status is required for registration.

Check one: ☐ First time college student ☐ ACC Returning Student ☐ Transfer Student ☐ Still in HS (Dual Credit)

I plan to enroll: ☐ Year ☐ Fall ☐ Fall Mini 1 ☐ Fall Mini 2 ☐ Fall Mini 3 (Holiday)
☐ Spring ☐ Spring Mini 1 ☐ Spring Mini 2 ☐ Spring Mini 3
☐ Summer 1 ☐ Summer 11 ☐ Summer 2

Educational Intent ☐ Earn Associate Degree(s), enter code below ☐ Earn Certificate(s), enter code below

☐ Earn credit/personal enrichment ☐ Earn credit/improve skills/Employment

☐ Earn credits to transfer ☐ Undeclared at this time

Major Code (1) _____ (2) _____

(see insert for listing of major codes)

Part A. Student Demographic Information (PLEASE PRINT & ONLY USE BLANK OR BLUE INK)

1. Social Security Number _____ / _____ / _____ 2. Gender: ☐ Male ☐ Female

3. Full Legal Name: Last _____ First _____ Middle _____

4. Current Residential Address _____ Apt.# _____

City _____ County _____ State _____ Zip _____

5. How long have you lived at your current address? _____ Years _____ Months

If less than 12 months, give address(es) for past 24 months:

Street _____ City _____ State _____ From _____ / _____ to _____ / _____

Street _____ City _____ State _____ From _____ / _____ to _____ / _____

6. Mailing Address _____ City _____ State _____ Zip _____

7. Home phone (_____) _____ 8. Cell phone (_____) _____

9. Date of Birth _____ / _____ / _____ 10. Email _____

11. Ethnic Background (optional)

☐ White ☐ Black (non-Hispanic origin) ☐ Hispanic

☐ Asian/Pacific Islander ☐ American Indian/Alaskan ☐ Nonresident-Foreign Student

12. Other or Former Name(s) under which records may be found including maiden: _____

13. Name of Emergency Contact _____ Phone (_____) _____

Part B. Educational Information

1. High school last attended _____ / _____ / _____

Name

City

State

Did you graduate from high school? ☐ Yes ☐ No If yes, date _____ Month, _____ Year

If you did not graduate, did you receive a GED? ☐ Yes ☐ No If yes, date _____ Month, _____ Year

Are you currently in high school? ☐ Yes ☐ No Date of anticipated graduation _____ Month, _____ Year

2 Check the highest level of education BEYOND HIGH SCHOOL you have reached at the time of application:

☐ None ☐ Some College ☐ Associate ☐ Bachelors ☐ Masters or higher

3. List ALL COLLEGES or UNIVERSITIES attended prior to admission/readmission to ACC. List the most recent first.

College or University Name

City, State

First Sem/Year

Last Sem/Year

***Official transcripts from each of the institutions listed above are required for continued registration and transcript release.**

4. Are you on scholastic probation or suspension at the last institution attended? ____Yes* ____No

**Requires transfer probation agreement signed by the Dean of Student Services 281.756.3517 as part of your admissions.*

Part C. Previous Residency Status (for all students)

1. During the 12 months prior to the term for which you are applying, did you attend a public college or university in Texas in a fall or spring term? ____Yes ____No

If you answered **Ano@**, continue to Part D. If you answered **Ayes@**, complete questions 2-5.

2. What Texas public institution did you last attend? (give full name)_____

3. In what terms were you last enrolled? (check all that apply) ____fall, 200____ ____spring, 200____

4. During your last semester at a Texas public institution, did you pay resident (in-state) or non-resident (out-state) tuition?

____resident (in-state) ____non-resident (out-state) ____unknown

5. If you paid in-state tuition at your last institution, was it because you were classified as a resident or because you were a non-resident who received a waiver? ____resident ____non-resident with a waiver ____unknown

-If you were enrolled at a Texas public institution during a fall or spring semester within the previous 12 months and were classified as a Texas resident, skip to Part J, sign and date this form and submit application.

-If you were not enrolled, or if you were enrolled but classified as a non-resident, continue to Part D.

Part D. Current Residency Claim

Are you a resident of Texas? ____Yes ____No

-If you answered **Ayes@**, continue to Part E.

-If you answered **Ano@**, complete the following question and continue to Part J. What state or country are you a resident?

-If you are uncertain, continue to Part E.

Part E. Acquisition of High School Diploma or GED.

Yes No

- 1.a. Did you graduate or will have graduated from a **public** high school or complete a GED in TX prior to the term for which you are applying?

- b. If you graduated or will graduate from high school in Texas, give name and city _____

2. Did you live or will you have lived in Texas the 36 months leading up to high school graduation or completion of the GED?

3. When you begin the semester for which you are applying, will you have lived in Texas for the previous 12 months?

4. Are you a U.S. citizen or permanent resident?

-If you answered **Ano@** to question 1a or 2 or 3, continue to Part F.

-If you answered **Ayes@** to all four questions, skip to Part J.

-If you answered **Ayes@** to questions 1, 2 and 3, but **Ano@** to question 4, complete a copy of the Affidavit provided by the Registrar=s Office. Skip to Part J and submit application with affidavit.

Part F. Basis of Claim of Residency (to be completed by everyone who did not answer **Ayes@ to questions 1a, 2 and 3 of Part E)**

1. Do you file your own federal income tax as an independent tax payer (married or single)? ____Yes ____No
2. Are you claimed as a dependent or are you eligible to be claimed as a dependent by a parent or court-appointed legal guardian? ____Yes ____No

Note: To be eligible to be claimed as a dependent, your parent or legal guardian must provide at least one half of your support. A step-parent does not qualify as a parent if he/she has not adopted the student.

3. If you answered **Ano@** to both questions above, who provides the majority of your support?

____Self ____Parent or guardian ____Other, list _____

-If you answered **Ayes@** to question 1, continue to Part G.

-If you answered **Ayes@** to question 2, skip to Part H.

-f you answered **Ano@** to 1 and 2 and **Aself@** to question 3, continue to Part G.

-f you answered **Ano@** to 1 and 2 and **Aparent or guardian@** to question 3, skip to Part H.

-f you answered **Ano@** to 1 and 2 and **Aother@** to question 3, skip to Part I and provide an explanation, then continue to Part J.

Part G. Questions for students who answered Yes to Question 1 or Self to Question 3 of Part F

	Yes	No	Yrs	No	Visa/Status
1. Are you a U.S. Citizen					
2. Are you a Permanent Resident of the U.S.? (must show card)					
3. Are you a foreign national whose application for Permanent Resident Status has been preliminarily reviewed? Note: You should have received a fee/filing receipt or Notice of Action (I-797) from USCIS showing your I-485 has been reviewed and has not been rejected. NOTE: You will be required to show your I-797 upon admissions.					
4. Are you a foreign national here with a visa or are you a Refugee, Asylee, Parolee or here under Temporary Protective Status? If so, indicate which type.					
5. Do you currently live in Texas? If you are out of state due to a temporary assignment by your employer or other temporary purpose, explain in Part I.					
6.a. If you currently live in Texas, how long have you been living here?					
b. What if your main purpose for being in the state? ___go to college ___establish/maintain a home ___work assignment ___other, explain in Part I					
7.a. If you are a member of the U.S. Military, is Texas your Home of Record					
b. What state is listed as your military legal residence for tax purposed on your Leave and Earnings Statement? State _____					
8. Do any of the following apply to you? (Check all that apply)					
a. Hold the title to real property (home, land) in TX? If yes, date acquired _____					
b. Own a business in TX? If yes, date acquired _____					
c. Hold a state or local license to conduct a business or practice a profession in TX? If yes, date acquired _____					
9. For the past 12 months, have you: (Check all that apply)					
a. been gainfully employed in TX?					
b. received services from a social service agency that provides services to homeless persons?					
10.a. Are you married to a person who could answer Ayes@ to any part of question 8 or 9?					
b. If yes, which question could be answered Ayes@ by your spouse? _____					
c. How long have you been married to the Texas resident?					

Part H. Questions for Students who answered Parent@ or AGuardian@ to Questions 3 of Part F.

	Yes	No	Yrs	Mo	Visa/Status
1. Is the parent or legal guardian upon whom you base your claim of residency a U.S. Citizen?					
2. Is the parent or legal guardian upon whom you base your claim a Permanent Resident of the U.S.? (must show original card)					
3. Is your parent or legal guardian a foreign national whose application for Permanent Resident Status has been preliminarily reviewed? Note: He/she should have received a fee/filing receipt or Notice of Action (I-797) from USCIS showing your I-485 has been reviewed and has not been rejected.					

	Yes	No	Yrs	Mo	Visa/Status
4. Is your parent or legal guardian a foreign national here with a visa or are you a Refugee, Asylee, Parolee or here under Temporary Protective Status? If so, indicate which type.					
5. Does your parent or legal guardian currently live in Texas? If you are out of state due to a temporary assignment by his/her employer or other temporary purpose, explain in Part I					
6.a. If he/she is currently living in Texas, how long has he/she been living here?					
b. What is your parent=s or legal guardian=s main purpose for being in the state? ___go to college ___establish/maintain a home ___work assignment ___other, explain in Part I					
7.a. If he/she is a member of the U.S. Military, is Texas his/her Home of Record?					
b. What state is listed as his/her military legal residence for tax purposed on his/her Leave and Earnings Statement? State _____					
8. Do any of the following apply to your parent or guardian? (Check all that apply)					
a. Hold the title to real property (home, land) in TX? If yes, date acquired _____					
b. Own a business in TX? If yes, date acquired _____					
c. Hold a state or local license to conduct a business or practice a profession in TX? If yes, date acquired _____					
9. For the past 12 months, has your parent or guardian: (Check all that apply)					
a. been gainfully employed in TX?					
b. received services from a social service agency that provides services to homeless persons?					
10.a. Is your parent or guardian married to a person who could answer "yes" to any part of question 8 or 9?					
b. If yes, which question could be answered "yes" by your parent=s or guardian=s spouse? _____					
c. How long has your parent or guardian been married to the Texas resident?					

Part I. General Comments. Is there any additional information that you believe that ACC should know in evaluating your eligibility to be classified as a resident? If so, please provide it below.

Part J. Oath of Texas Residency and Accuracy of Information

I understand that officials at ACC rely upon the information submitted on this form to determine my status for admissions and residency eligibility. I authorize the college to verify the information I have provided and to retrieve my TASP/THEA scores from National Evaluation Systems for TSI status determination and enrollment eligibility. I agree to notify the proper officials at ACC of any changes in the information provided. I certify that the information on this application is complete and correct, and I understand that the submission of false information is grounds for rejection of my application, cancellation of enrollment, and/or appropriate disciplinary action. I further certify that I have received information about bacterial meningitis required by Texas Education Code.

NOTE: Permanent resident aliens and foreign students must submit copies of permit and/or visa.

IMPORTANT INFORMATION ABOUT BACTERIAL MENINGITIS

This information is being provided to all new college students in the state of Texas. Bacterial Meningitis is a serious, potentially deadly disease that can progress extremely fast ^B so take utmost caution. It is an inflammation of the membranes that surround the brain and spinal cord. The bacteria that causes meningitis can also infect the blood. This disease strikes about 3,000 Americans each year, including 100-125 on college campuses, leading to 5-15 deaths among college students every year. There is a treatment, but those who survive may develop severe health problems or disabilities.

WHAT ARE THE SYMPTOMS?

High fever	Severe headache
Rash or purple patches on skin	Vomiting
Light sensitivity	Stiff neck
Confusion and sleepiness	Nausea
Lethargy	Seizures

There may be a rash of tiny, red-purple spots caused by bleeding under the skin. These can occur anywhere on the body. The more symptoms, the higher the risk, so when these symptoms appear seek immediate medical attention.

HOW IS BACTERIAL MENINGITIS DIAGNOSED?

1. Diagnosis is made by a medical provider and is usually based on a combination of clinical symptoms and laboratory results from spinal fluid and blood tests.
2. Early diagnosis and treatment can greatly improve the likelihood of recovery.

HOW IS THE DISEASE TRANSMITTED?

1. The disease is transmitted when people exchange saliva (such as by kissing, or by sharing drinking containers, utensils, cigarettes, toothbrushes, etc.) or come in contact with respiratory or throat secretions.

HOW DO YOU INCREASE YOUR RISK OF GETTING BACTERIAL MENINGITIS?

1. Exposure to saliva by sharing cigarettes, water bottles, eating utensils, food, kissing, etc.
2. Living in close conditions (such as sharing a room/suite in a dorm or group home).

WHAT ARE THE POSSIBLE CONSEQUENCES OF THE DISEASE?

1. Death (*in 8 to 24 hours from perfectly well to dead*)
2. Permanent brain damage
3. Kidney failure
4. Learning disability
5. Hearing loss, blindness
6. Limb damage (fingers, toes, arms, legs) that requires amputation
7. Gangrene
8. Coma
9. Convulsions

CAN THE DISEASE BE TREATED?

1. Antibiotic treatment, if received early, can save lives and chances of recovery are increased. However, permanent disability or death can still occur.
2. Vaccinations are available and should be considered for:
 - i. Those living in close quarters
 - ii. College students 25 years old or younger
3. Vaccinations are effective against 4 of the 5 most common bacterial types that cause 70% of the disease in the U.S. (but does not protect against all types of meningitis).
4. Vaccinations take 7-10 days to become effective, with protection lasting 3-5 years.
5. The cost of vaccine varies, so check with your health care provider.
6. Vaccination is very safe ^B most common side effects are redness and minor pain at injection site for up to two days.
7. Vaccination is available from your health care provider.

HOW CAN I FIND OUT MORE INFORMATION?

1. Contact your own health care provider.
2. Contact your Student Health Center, if available.
3. Contact your local or regional Texas Department of Health office
4. Contact web sites: www.cdc.gov/ncidod/dbmd/diseaseinfo; www.acha.org