

INTERNATIONAL STUDENT APPLICATION FOR ADMISSION CLINTON, MUSCATINE AND SCOTT COMMUNITY COLLEGES

Clinton Community College
1000 Lincoln Boulevard
Clinton, Iowa 52732
(563) 244-7001

Muscatine Community College
152 Colorado Street
Muscatine, Iowa 52761
(563) 288-6001

Scott Community College
500 Belmont Road
Bettendorf, Iowa 52722
(563) 441-4001

Toll-free 1-888-336-3907

CLEARLY TYPE OR PRINT ANSWERS TO ALL ITEMS AND RETURN TO THE ABOVE ADDRESS.

Have you previously applied/been enrolled in college credit classes at...
 Clinton Muscatine Scott Community Colleges?

If yes, what year did you first attend? _____
Name while enrolled: _____

Social Security Number

Last Name

First Name

Middle Name

Do you intend to complete a degree, diploma or certificate program at this college? Yes No
(Only degree seeking students are eligible for federal financial aid.)

What is your main purpose for attending this college?
(check one)

- A. Prepare to enter the job market
- B. Improve skills for present job
- C. Prepare to change careers
- D. Meet certification/licensure requirements
(other than for initial job entry)
- E. Transfer to another college/university
- F. Explore courses to decide on a career
- G. Self improvement/Improve basic skills
- H. Personal interest
- I. Undecided/Unknown

Date of birth (Mo., Day, Yr.)

Gender Female Male

Are you an Iowa resident? Yes No

Length of Iowa residency _____ Yr. _____ Month

Please indicate your racial/ethnic origin (optional).

This information will remain confidential. Check only one category:

- | | |
|--------------------------------------|---------------------------|
| 1. African American, Non-Hispanic | 4. Hispanic or Latino |
| 2. Asian or Pacific Islander | 5. Caucasian/Non-Hispanic |
| 3. American Indian or Alaskan Native | 6. International Student |

Are you a citizen of the United States? Yes No If no, what is your current visa status? _____
If no, are you: U.S. Permanent Resident Refugee Asylee International Student (1-20 Required)
Country of Birth _____ Country of Citizenship _____

E-mail Address

List a permanent address where mail will always reach you if different from current address.

Address: (Number and Street)

City

State

Zip Code

Phone (area code)

List a current or local address.

Address: (Number and Street)

City

State

Zip Code

Phone (area code)

Work Phone (area code and extension)

Which semester do you plan to begin?

Fall (August-December) Winter (January) Spring (January-May) Summer (May-July) Which year? _____

Area of Concentration (Program of study)

EDUCATIONAL BACKGROUND

Name of high school from which you were (or will be) graduated including city, state, month and year. Non-graduates, list last school attended including name of school, city, state:

High School Name or GED	City, State	If Applicable, month/year of Graduation	Student's Name While Enrolled

Please select the category and sub-category (if applicable) that best describes your educational background at the time you enter classes at this college?

- 1. High School Equivalency (GED) Received:
- 2. Currently in High School
- 3. Not a High School Graduate
- 4. High School Graduate
- 5. College Course Work/Degree

What is the highest award (if any) you have earned at a college or university?

- Certificate
- Diploma
- AA/AS/AAS Degree
- BA/BS Degree
- Graduate Degree
- Other

List all colleges you have or are currently attending. If you have never attended a college, write NONE.

College Name	City, State	From (mo./yr.)	To (mo./yr.)	Credits Earned	Type of Degree Earned	Student's Name While Enrolled

Has either of your parents received a four-year college degree? Yes No

Is English your native language? (optional) Yes No

Applicants: make sure official high school, Ged and all college transcripts are sent to the college admissions office. If you are not a united states citizen, you must enclose a copy of your passport, visa, I-94 or green card. This is necessary for billing and admittance to the college. No application fee required.

CERTIFICATION OF INFORMATION

I certify that all of the information I have supplied in this application and any supporting documents is true, accurate and complete.

SIGNATURE _____ DATE _____

It is the policy of Eastern Iowa Community College District not to discriminate in its programs, activities, or employment on the basis of race, color, national origin, sex, disability, age, sexual orientation, gender identity, creed, religion, and actual or potential family, parental or marital status, as required by the Iowa Code §§216.6 and 216.9, Titles VI and VII of the Civil Rights Act of 1964 (42 U.S.C. §§ 2000d and 2000e), the Equal Pay Act of 1973 (29 U.S.C. § 206, et seq.), Title IX (Educational Amendments, 20 U.S.C. §§ 1681-1688), Section 504 (Rehabilitation Act of 1973, 29 U.S.C. § 794), and Title II of the Americans with Disabilities Act (42 U.S.C. § 12101, et seq.). If you have questions or complaints related to compliance with this policy, please contact Debora J. Sullivan, Equal Employment Opportunity Officer/Equity Coordinator, Eastern Iowa Community College District, 101 West Third Street, Davenport, Iowa 52801, 563-336-3487, djsullivan@eicc.edu or the Director of the Office for Civil Rights, U.S. Department of Education, Citigroup Center, 500 West Madison Street, Suite 1475, Chicago, Illinois 60661-7204, phone number 312-730-1560, fax 312-730-1576, OCR.Chicago@ed.gov.

Dean of Student Development, Clinton Community College, 1000 Lincoln Boulevard, Clinton, Iowa 52732, (563) 244-7001; Dean of Student Development, Muscatine Community College, 152 Colorado Street, Muscatine, Iowa 52761, (563) 288-6001; Dean of Student Development, Scott Community College, 500 Belmont Road, Bettendorf, Iowa 52722, (563) 441-4001.