



Student Information Form

Legal Name: _____
Last First Middle

*SSN/TIN: _____ Date of Birth: _____ Sex: Male Female
Month/Day/Year

Mailing Address: _____
PO Box or Home Delivery Address City State Zip Code

Home Address: _____
Street Name, House or Apt City State Zip Code

Phone: _____ Email Address: _____

Emergency Contact Information (Mandatory):
 Name: _____ Relationship: _____
 Contact Number: _____ Alternate Number: _____

Please complete the following questions

- Military Status (Choose One):** Active Duty Reserve Veteran Not Applicable
Marital Status (Choose One): Single Single Parent Married Divorced Separated
Did at least one of your parents graduate from a 4-year college? Yes No
Are you receiving public assistance? Yes No
Do you require accommodations? Yes No
Are you pursuing your Adult High School Diploma? Yes No

Personal Status:

- | | | |
|--|---|---------------------------------------|
| <input type="checkbox"/> Employed Full Time | <input type="checkbox"/> Non-Supervisory | <input type="checkbox"/> Supervisory |
| <input type="checkbox"/> Employed Part Time | <input type="checkbox"/> Unemployed | <input type="checkbox"/> TANF |
| <input type="checkbox"/> Dislocated Worker | <input type="checkbox"/> Not Employed & Not Seeking | <input type="checkbox"/> WIA IB |
| <input type="checkbox"/> Displaced Homemaker | <input type="checkbox"/> Rehabilitation | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Incarcerated | <input type="checkbox"/> Retired | |

Ethnic Origin

- | | | |
|--|---|--|
| <input type="checkbox"/> American Indian | <input type="checkbox"/> Filipino | <input type="checkbox"/> Ponapean |
| <input type="checkbox"/> Alaskan | <input type="checkbox"/> Hispanic or Latino | <input type="checkbox"/> Vietnamese |
| <input type="checkbox"/> Black or African American | <input type="checkbox"/> Japanese | <input type="checkbox"/> White, Non-Hispanic |
| <input type="checkbox"/> Chamorro | <input type="checkbox"/> Korean | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Chinese | <input type="checkbox"/> Kosrean | |
| <input type="checkbox"/> Chuukese | <input type="checkbox"/> Palauan | |

Citizenship Status

- | | | |
|---|--|--|
| <input type="checkbox"/> US Citizen | <input type="checkbox"/> 1-20/Foreign Student/F-1 Visa | <input type="checkbox"/> Marchallese Citizen |
| <input type="checkbox"/> CNMI Citizen | <input type="checkbox"/> Other Non-Immigrant Alien | <input type="checkbox"/> Palauan Citizen |
| <input type="checkbox"/> Permanent Resident Alien | <input type="checkbox"/> FSM Citizen | |

The Language(s) Used at Your Home (Check all the apply)

- | | | |
|------------------------------------|--|---------------------------------------|
| <input type="checkbox"/> Cantonese | <input type="checkbox"/> Korean | <input type="checkbox"/> Tagalog |
| <input type="checkbox"/> Chamorro | <input type="checkbox"/> Ilocano | <input type="checkbox"/> Vietnamese |
| <input type="checkbox"/> English | <input type="checkbox"/> Mandarin | <input type="checkbox"/> Visayan |
| <input type="checkbox"/> Japanese | <input type="checkbox"/> Micronesia Language | <input type="checkbox"/> Other: _____ |



Student Information Form

Residency

I AM A LEGAL RESIDENT OF (your legal residence is your voting residence): _____
State/Territory/Country

Attainable Goals Within Program Major

- | | | |
|--|--|--|
| <input type="checkbox"/> Enter College or Training | <input type="checkbox"/> Improve English Skills | <input type="checkbox"/> Update/Upgrade Job Skills |
| <input type="checkbox"/> Family Goal | <input type="checkbox"/> Military | <input type="checkbox"/> U.S. Citizenship |
| <input type="checkbox"/> Get a Job | <input type="checkbox"/> Personal Goal | <input type="checkbox"/> Work-Based Project |
| <input type="checkbox"/> HS Diploma/GED | <input type="checkbox"/> Retain Job | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Improve Basic Skills | <input type="checkbox"/> Transfer to Another College | |

School Information – Please list high school you graduated from or last attended

1. _____
2. _____
3. _____

Highest Level of Education Completed (Please Check One)

- | | | |
|--|--|--|
| <input type="checkbox"/> None | <input type="checkbox"/> Some College | <input type="checkbox"/> 4 Year College |
| <input type="checkbox"/> GED Certificate | <input type="checkbox"/> Technical/Certificate | <input type="checkbox"/> Graduate/Professional |
| <input type="checkbox"/> High School Diploma | <input type="checkbox"/> AA/AS Degree | |

Reason For Attending This Semester

- | | | |
|--|---|---|
| <input type="checkbox"/> Adult Basic Education | <input type="checkbox"/> English as a Second Language | <input type="checkbox"/> Update or Upgrade Job Skills |
| <input type="checkbox"/> Earn a Degree | <input type="checkbox"/> GED Preparation Courses | <input type="checkbox"/> Journeyworker Certificate |
| <input type="checkbox"/> Earn a Certificate | <input type="checkbox"/> Personal Interest | Trade: _____ |
| <input type="checkbox"/> Earn College Credits for Transfer | <input type="checkbox"/> Transfer Credits to my High School | |

Enrollment Status

- | | |
|---|--|
| <input type="checkbox"/> First Time College Student | <input type="checkbox"/> Returning GCC Student |
| <input type="checkbox"/> Continuing GCC Student | <input type="checkbox"/> Transfer Student |

How Did You Learn About GCC?

- | | | |
|--|---|-----------------------------------|
| <input type="checkbox"/> GCC Catalog | <input type="checkbox"/> Recruiting Event | <input type="checkbox"/> Employer |
| <input type="checkbox"/> GCC Employee | <input type="checkbox"/> Job Fair | <input type="checkbox"/> TV Ad |
| <input type="checkbox"/> GCC Counselor/Advisor | <input type="checkbox"/> Newspaper Ad | <input type="checkbox"/> Walk In |
| <input type="checkbox"/> GCC Website | <input type="checkbox"/> Radio Ad | |
| <input type="checkbox"/> Family/Friends | <input type="checkbox"/> School Counselor/Advisor | |

I certify that the statements made in this Student Information Form are true and correct. I understand that any false information found to have been willfully given by me herein or in any supporting document may be cause for denial of admissions or immediate dismissal from Guam Community College.

Signature: _____ **Date:** _____