



Application for Admissions as a Declared Student

Last Name _____	First Name _____
Student ID _____	Date of Birth _____
Email _____	Phone _____
Citizenship _____	Semester _____
Status _____	Declaring _____

I am applying for admission as a declared student in the following program:

Associate of Arts Degrees		
<input type="checkbox"/> Culinary Arts	<input type="checkbox"/> Education	<input type="checkbox"/> Liberal Studies
Associate of Science Degrees		
<input type="checkbox"/> Accounting	<input type="checkbox"/> Criminal Justice – Law Enforcement Administration	<input type="checkbox"/> Marketing
<input type="checkbox"/> Automotive Service Tech – General Service Technician	<input type="checkbox"/> Criminal Justice – Forensic Lab Technician	<input type="checkbox"/> Medical Assisting
<input type="checkbox"/> Automotive Service Tech – Master Service Technician	<input type="checkbox"/> Criminal Justice – Forensic Computer Examiner	<input type="checkbox"/> Office Technology
<input type="checkbox"/> Civil Engineering Technology	<input type="checkbox"/> Early Childhood Education	<input type="checkbox"/> Practical Nursing
<input type="checkbox"/> Computer Networking	<input type="checkbox"/> Foodservice Management	<input type="checkbox"/> Pre-Architectural Drafting
<input type="checkbox"/> Computer Science	<input type="checkbox"/> Human Services	<input type="checkbox"/> Supervision & Management
<input type="checkbox"/> Criminal Justice – Administration of Criminal Justice	<input type="checkbox"/> International Hotel Management	<input type="checkbox"/> Surveying Technology
		<input type="checkbox"/> Tourism & Travel Management
		<input type="checkbox"/> Visual Communications
Certificate Programs		
<input type="checkbox"/> Automotive Service Tech General Service Technician	<input type="checkbox"/> Criminal Justice: Marine & Terrestrial Conservation Enforcement	
<input type="checkbox"/> Automotive Service Tech Master Service Technician	<input type="checkbox"/> Early Childhood Education	
<input type="checkbox"/> Computer Aided Design & Drafting	<input type="checkbox"/> Education	
<input type="checkbox"/> Computer Science	<input type="checkbox"/> Environmental Technician	
<input type="checkbox"/> Construction Technology: Carpentry	<input type="checkbox"/> Family Services	
<input type="checkbox"/> Construction Technology: Electricity	<input type="checkbox"/> Fire Science Technology	
<input type="checkbox"/> Construction Technology: Heating Ventilation Air-Conditioning (HVAC)	<input type="checkbox"/> Medical Assisting	
<input type="checkbox"/> Construction Technology: Masonry	<input type="checkbox"/> Medium/Heavy Truck Diesel Technology	
<input type="checkbox"/> Construction Technology: Plumbing	<input type="checkbox"/> Office Technology	
<input type="checkbox"/> Construction Technology: Reinforcing Metal Worker	<input type="checkbox"/> Sign Language Interpreting	
<input type="checkbox"/> Construction Technology: Welding	<input type="checkbox"/> Supervision & Management	
<input type="checkbox"/> Criminal Justice: Law Enforcement	<input type="checkbox"/> Surveying Technology	



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Admissions Eligibility

Submission of official transcripts are required; diplomas will not be accepted.

Admissibility is met by the following:

High School Graduate

Name of High School: _____ Graduation Date: _____

Other Name (If applicable): _____

High School Equivalent (GED or HiSet)

Completed either AA/AS/BA or BS degree*

Name of College or University: _____

Graduation Date: _____

Earned at least 45 semester hours with a cumulative GPA of 2.0 or higher*

Name of College or University: _____

Name of College or University: _____

Name of College or University: _____

**The Evaluation Request Form must be submitted for transfer credit review*

Failure to provide transcripts will result in the denial of admissions, official transcripts can be mailed or emailed to:

GUAM COMMUNITY COLLEGE
ADMISSIONS & REGISTRATION OFFICE
P.O. BOX 23069 G.M.F.
BARRIGADA, GUAM 96921-0307

Gcc.registrar@guamcc.edu

I certify that the statements made in this 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 refusing to admit me to or my immediate dismissal from Guam Community College.

Student Signature: _____ **Date:** _____

Admissions & Registration Use Only:

Admissibility into a program has been determined via the following:

High School transcripts

High School Equivalency transcripts

College/University transcripts

Admissions Decision: Accepted Denied

Reason for Denial: _____