

**APPLICATION FOR ADMISSION  
SHORT FORM**

**MISSOULA COLLEGE  
909 SOUTH AVENUE W, MISSOULA, MT 59801  
(406) 243-7882**

**Name**, Last: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_ SSN: \_\_\_\_\_

If you have used other names, please list: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Current address:

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Email: \_\_\_\_\_ DOB: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

**VOLUNTARY INFORMATION**

Are you:      Male       Female       American Indian/Alaskan Native       Asian   
Hispanic/Latino? Yes       No       Black/African American       Native Hawaiian/Pacific Islander   
White       Other: \_\_\_\_\_

**ACADEMIC INFORMATION**

Do you have a high school diploma? : Yes       No       **If yes**, please list *school* you received it from and the *date* received:  
\_\_\_\_\_

Do you have a GED? Yes       No

When do you plan to enter?      Fall       Spring       Summer       Year: \_\_\_\_\_

Have you ever attended:  
 University of Montana      Dates: \_\_\_\_\_ to \_\_\_\_\_  
 Missoula College      Dates: \_\_\_\_\_ to \_\_\_\_\_  
 Neither

Please indicate your educational goal:

- Associate degree/certificate (field of study \_\_\_\_\_)
- Non-degree seeking

If you have attended or are attending a college or university, you must provide the following information for each institution, whether or not credit was earned:

<b>College</b>	<b>City</b>	<b>State</b>	<b>Date of Attendance</b>	<b>Degree Received/ # credits earned</b>

# APPLICATION FOR ADMISSION SHORT FORM

## RESIDENCY

I should be classified for fee purposes as: a Montana Resident  an Out-of-State Resident   
 State of Residency: \_\_\_\_\_

Are you currently employed? Yes  No  If yes, please list your employer and the date you started:

Employer \_\_\_\_\_ Date \_\_\_\_\_

Do your parents/legal guardian claim you as a federal income tax exemption? Yes  No

**If yes:** List your parent's/legal guardian's name and address below, and complete the following about your parent/legal guardian:

Parent/legal guardian \_\_\_\_\_ Address \_\_\_\_\_

- a. Date permanent residency in Montana began? \_\_\_\_\_
- b. Most recently filed state income tax return State: \_\_\_\_\_ Tax Year: \_\_\_\_\_
- c. Current voter registration State: \_\_\_\_\_ Date of Registration: \_\_\_\_\_
- d. Current auto registration State: \_\_\_\_\_ Date of Registration: \_\_\_\_\_
- e. Current driver's license State: \_\_\_\_\_ Date of Registration: \_\_\_\_\_

**If no:** Have you been present in Montana for the past 12 months? Yes  No

**If yes, complete the following information:**

- a. On what date did your permanent residency in Montana begin? \_\_\_\_\_
- b. Your most recently filed state income tax return State: \_\_\_\_\_ Tax Year: \_\_\_\_\_
- c. Your current voter registration State: \_\_\_\_\_ Date of Registration: \_\_\_\_\_
- d. Your current auto registration State: \_\_\_\_\_ Date of Registration: \_\_\_\_\_
- e. Your current driver's license State: \_\_\_\_\_ Date of Registration: \_\_\_\_\_
- f. Are you currently in the armed services Yes  No

Dates of Active Duty: From: \_\_\_\_\_ To: \_\_\_\_\_  
 City and state from which you entered the armed services: \_\_\_\_\_

If you are married, is your spouse employed in Montana on a full-time basis? Yes  No

Employer \_\_\_\_\_ Date \_\_\_\_\_

**SAFETY AND SECURITY** All applicants must answer these questions:

- |  |  |
|--|--|
| 1) Have you ever been convicted of a felony (please include instances of deferred sentencing)?   | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 2) Have you ever been subjected to court-ordered confinement for threatening or causing physical or emotional injury to persons or property? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 3) Have you ever been disciplined, suspended from, or placed on probation at any educational institution for non-academic reasons?           | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 4) Have you ever been required to register as a sexual or violent offender?  | Yes <input type="checkbox"/> No <input type="checkbox"/> |

**If you answered "yes" to any of the above questions, please provide an explanation with this application. Failure to do so will delay the processing of your application.**

I hereby certify, to the best of my knowledge, the information on this application for admission is true and complete, without evasion or misrepresentation. I understand that, if it is later found otherwise, it is sufficient cause for rejection or dismissal. If my application for admission is approved, I agree to abide by the present and future rules and regulations both academic and non-academic, and the scholastic standards of the appropriate institution, its colleges, and schools, departments, and institutions, including, but not limited to those rules, regulations, and standards stated in the catalog. I further acknowledge that, if I fail to adhere to these regulations or meet these requirements, my registration may be canceled.

Signature of applicant: \_\_\_\_\_

Date: \_\_\_\_\_