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:

<table>
<thead>
<tr>
<th>College</th>
<th>City</th>
<th>State</th>
<th>Date of Attendance</th>
<th>Degree Received/ # credits earned</th>
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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:

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<th>Parent/legal guardian</th>
<th>Address</th>
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  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 ☐  No ☐

2) Have you ever been subjected to court-ordered confinement for threatening or causing physical or emotional injury to persons or property?  Yes ☐  No ☐

3) Have you ever been disciplined, suspended from, or placed on probation at any educational institution for non-academic reasons?  Yes ☐  No ☐

4) Have you ever been required to register as a sexual or violent offender?  Yes ☐  No ☐

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: ____________________________

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