



OFFICE USE ONLY

Student ID# _____

Application Received: _____ / _____ / _____ Receipt # _____

Transfer Credits: _____

TEST _____ R _____ E _____ M _____ A _____

LS CLASSES R _____ E _____ M _____

TEST DATE ____ / ____ / ____ ____ / ____ / ____

STATUS Regular Provisional Learning Support Special Admit ____ / ____ / ____

APPLICATION FOR ADMISSION / RE-ADMISSION

Complete and return with a non-refundable \$15.00 application fee. Former students may be exempt. Application will be returned if not completed in full. Please mark N/A if item is not applicable.

Social Security Number - -

Date of Birth _____
Month Day Year

Last Name _____ First Name _____ MI _____ Former Name(s) _____

Mailing Address _____

City _____ State _____ Zip _____ County _____

Home Phone _____ Cell Phone _____ Business Phone _____

Primary Email _____ Alternate Email _____

The following information will be used to establish residency for tuition and financial aid eligibility. Failure to provide accurate valid information may impact tuition and result in repayment of any financial aid funds received.

<p>Are you applying for in-state tuition? If yes, more documentation will be required.</p> <p>Are you currently active duty military? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Are you a military dependent? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Are you retired military? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Are you 24 years old or younger? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, your parents' state of legal residency? _____</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Are you a U.S. citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If no, what is your country of residency? _____</p> <p>Are you a permanent resident? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Are you a Georgia resident? If yes, how long have you lived in Georgia _____</p> <p>Have you ever been convicted of a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No (may affect licensure for employment)</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
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<p>Please list your desired Program of Study:</p> <p>_____</p> <p><input type="checkbox"/> Degree <input type="checkbox"/> Diploma <input type="checkbox"/> Certificate</p>	<p><input type="checkbox"/> Fall</p> <p><input type="checkbox"/> Spring</p> <p><input type="checkbox"/> Summer</p> <p>Year _____</p>	<p><input type="checkbox"/> Beginning</p> <p><input type="checkbox"/> Transfer</p> <p><input type="checkbox"/> Dual/Joint Enrollment</p> <p><input type="checkbox"/> Returning</p> <p><input type="checkbox"/> Transient</p> <p><input type="checkbox"/> Special Admit</p>	<p><input type="checkbox"/> Flint River Campus</p> <p><input type="checkbox"/> Griffin Campus</p> <p><input type="checkbox"/> Butts County Center</p> <p><input type="checkbox"/> Henry - Academy for Advanced Studies</p> <p><input type="checkbox"/> Jasper County Center</p> <p><input type="checkbox"/> Taylor County Center</p>
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Check one: Graduated from high school. What year? _____ Will graduate in 20 _____

High School _____ City _____ State _____

Obtained GED® diploma. What year? _____ If no high school or GED® diploma, list highest grade attended _____

Previously attended Flint River or Griffin Technical College? _____

If yes, when? _____

List all colleges, universities and technical colleges you have attended or are currently attending: You MUST submit ALL official transcripts to SCTC Admissions Office before acceptance

List: Name of Institution, State, Years Attended

1. _____	4. _____
2. _____	5. _____
3. _____	6. _____

The information below is not used to determine eligibility. This data is used for statistical purposes only.

Are you Hispanic/Latino? Yes No Please check all that apply:

Gender: Male Female American Indian/Alaskan Native Asian Black/African American

Native Hawaiian/Pacific Islander White

Pursuant to O.C.G.A. 16-10-20, it is a felony to make a false statement on any state document. In addition, making a false statement on this application may result in your dismissal from the college.

Signature _____ Date _____

Emergency Contact _____ Phone _____

ENTRANCE REQUIREMENTS

1. **EDUCATION** - A high school diploma from an approved agency or a GED is required for entrance to most programs. Home school students requesting admission must submit a letter of intent to home school with verified attendance reports. This student must also submit annual progress reports or final transcript from junior and senior years including the graduation date.
2. **AGE** - Applicants must be at least 16 years of age to enroll. Some programs have additional age requirements.

ADMISSIONS PROCEDURES

1. Submit a completed application for admission and pay a \$15 non-refundable application fee.
2. Complete the COMPASS placement exam offered by SCTC or submit satisfactory SAT, ACT, or ASSET scores if taken within the past five years. Official transcripts from regionally or nationally accredited post secondary institutions documenting equivalent program-level English and math course work may be used in lieu of completing the assessment for transfer credit. Some programs have additional requirements.
3. Submit an official copy of a high school transcript or GED transcript with test scores and all post secondary transcripts in an official sealed envelope to the Admissions Office. Complete a Transfer Credit Evaluation Request Form if you have transferable college credit.
4. Complete and submit all student financial aid information.

Submit applications and paperwork to:

Southern Crescent Technical College
Flint River Campus
Office of Admissions
1533 Highway 19 South
Thomaston, GA 30286
706-646-6148
800-752-9681

Southern Crescent Technical College
Griffin Campus
Office of Admissions
501 Varsity Road
Griffin, GA 30223
770-228-7348
877-897-0006

NOTE: Please contact the Admissions Office if you have a disability or handicap that may require special assistance.

FINANCIAL AID

Financial assistance is available to qualified students from a variety of federal and state sources. Students at Southern Crescent Technical College can look to several areas for financial aid: Pell Grant, HOPE Grant, and HOPE Scholarship. To be eligible for financial aid, a student must apply for admission, be accepted into an approved program of study, and have a high school diploma or equivalent (GED). Students should apply for financial aid at least two to three weeks before registering for classes. Students may apply online for HOPE at www.GACollege411.org and PELL at www.fafsa.ed.gov.

PHOTOGRAPHIC LIKENESS AND QUOTATION RELEASE POLICY

By signing and submitting this application and upon my admission to Southern Crescent Technical College, I understand that my name, quotations, and photographic likeness - including video footage - may be used in all forms of media for advertising, trade, and any other lawful purposes on behalf of Southern Crescent Technical College or the Technical College System of Georgia and that I will not receive now or in the future any compensation for this usage. I also understand that my name, quotations, and photographic likeness may be gathered from and posted to SCTC's social media sites and web site and can be downloaded by any computer user on or off campus.

I also understand that, as a student age 18 or older, it is my responsibility to notify the Southern Crescent Office of Student Affairs if I refuse to have my name, quotations, or photographic likeness used for the College's unlimited lawful purposes. In addition, all students under the age of 18 must have parental or guardian permission for his/her name, quotations, or photographic likeness to be used by the College. In this instance, this form may be obtained in the Office of Marketing and Public Relations.

STATEMENT OF ASSURANCE

As set forth in full in the student handbook/course catalog, Southern Crescent Technical College does not discriminate on the basis of race, color, creed, national or ethnic origin, gender, religion, disability, age, political affiliation or belief, veteran status, or citizenship status (except in those special circumstances permitted or mandated by law). Title IX/Equity Coordinator: Special Services Manager, Griffin Campus, 501 Varsity Road, Griffin, GA 30223, (770) 228-7382; ADA/Section 504 Coordinator: Special Services Coordinator, Griffin Campus, 501 Varsity Road, Griffin, GA 30223, (770) 228-7258. Any complaints filed against the Title IX/Equity Coordinator or ADA/Section 504 Coordinator on any campus/center shall be handled by the Vice President for Student Affairs, Griffin Campus, 501 Varsity Road, Griffin, GA 30223, (770) 228-7348.

My signature on this application is my acknowledgment of and agreement with the statements that follow:

- I certify that the information contained in this application is true and correct and understand that misrepresentation or omission of information may be cause for rejection or dismissal.
- I certify that by signing this application I have incurred a \$15 application fee and that fee is nonrefundable.
- All materials submitted for application become the property of Southern Crescent Technical College and will not be returned to the applicant.
- I give permission for SCTC to release information to potential employers as part of the job placement service provided by the college.
- I understand that SCTC is not liable for any emergency medical attention provided nor for charges incurred from such.

Southern Crescent Technical College is a Unit of the Technical College System of Georgia.