

OFFICIAL USE ONLY Student ID#: _

New Student 🗌 👘 Returning Student 🗌 Proof of lawful presence _ Received by _

Date .

APPLICATION FOR ADMISSION / READMISSION

APPLICATION PROCEDURES:

- 1. Submit the completed application with a \$20.00 non-refundable application fee. (Former applicants who previously paid an
 - application fee are not required to pay again). Payment of application fee does not guarantee enrollment.
- 2. Submit an official high school or GED transcript and official transcripts from all colleges previously attended.
- 3. Take a placement test or submit valid SAT, ACT, COMPASS, or ASSET scores.

Please PRINT clearly

SECTION 1 PERS	UNAL DATA							
SOCIAL SECURITY NUMBER					DATE OF B (MM/DD/Y			
LAST NAME (LEGAL)		FIR	ST NAME (LEGAL)	I		MIDDLE NAME		
ALL PREVIOUS NAMES USED				E-MAIL ADD	RESS	1		
MAILING ADDRESS							AF	⊃Т.
СІТҮ		STATE		ZIP CODE		COUNTY		
HOME PHONE		WORK PH	ONE		CELL PHO	DNE		
EMERGENCY CONTACT NAME		REL	ATIONSHIP		PH	ONE		
SECTION 2 STATI	STICAL DAT	A				or purposes of repo d will not be used i		
GENDER	🗌 Male	🗌 Fe	DAOE	🗆 America	an Indian o	r Alaskan Native (
ARE YOU HISPANIC OR LATING)? 🗌 Yes	🗌 No			r African A Tawaiian o	merican (3) r other Pacific Islai	nder (4)	
SECTION 3 CITIZE	ENSHIP INFO	RMATIO	N					
Are you a U.S. citizen? 🗌 Yes	□ No If y	es, go to Se	ection 4 - Residen	cy lfnotal	J.S. citizen,	are you a permanen	tresident? 🗌	Yes 🗌 No
				Perman	ent resident	s must present a re		
If not a U.S. Citizen OR perman	ent resident, list	the followin	g:					
VISA type		Country of	Citizenship			_ Country of Birth		
SECTION 4 RESID	ENCY INFO	RMATION	l This i eligib		ill be used	to establish resider	icy for tuition a	and financial aid
Verification documents may i acceptable documents, visit								complete list of
Any student not providing the information may impact tuition		ocumentat	ion will not be o	onsidered fo	r in-state tı	iition. Failure to pr	ovide accurate	e and valid
1. Are you applying for in-sta						-	d.	
2. Have you been a Georgia							_	
3. If you are 24 years of age							res 🗌 No	
If # 3 is YES, what is th	0				-			
If # 3 is YES, indicate h			-			-	-	-
4. If you are 24 years of age or o			-		-			
5. Are you active duty military s6. Are you a U.S. Citizen? [CS LINU AIC	you an acuve	outy mintary	dependent stationed	in Georgia? L	
7. If not a U.S. Citizen, are y			? 🗌 Yes 🗌	No				
Non-citizen permanent					ia for in-sta	te or out-of-state t	uition rate con	sideration
8. If not a U.S. Citizen OR p					_			

SECTION 5 MILITARY INFORMATION
1. Are you currently active duty, a veteran, a member of the National Guard, or a Reservist in the U.S. Armed Forces? 🗌 Yes 🗌 No
If yes, please specify: 🗌 Active Duty 🗌 Veteran 🗌 National Guard 🔲 Reservist
Which branch? 🗌 Air Force 🗌 Army 🗌 Coast Guard 🗌 Marine Corps 🗌 Navy
2. What is your Home of Record state?
3. Are you stationed or assigned to Georgia? Yes No
4. Are you a dependent or spouse of an active duty member, veteran, member of the National Guard, or a Reservist in the U.S. Armed Forces? Yes No If yes, please specify: Active Duty Veteran National Guard Reservist
Which branch? Air Force Army Coast Guard Marine Corps Navy
SECTION 6 PARENT INFORMATION (Check all that apply) This information is used for statistical purposes only and will not be used to determine admissions
Did your father complete: High School 🗌 College or beyond 🗌 Unknown 🗌
Did your mother complete: High School 🗌 College or beyond 🗌 Unknown 🗌
SECTION 7 ENTRANCE INFORMATION (Select one from each category)
Entrance Term: Admit Status: Campus Location: Fall New (First time STC student) Crossroads Spring Returning (Previously attended STC) Effingham Summer Special (Non-award seeking student taking credit courses for personal or professional benefit) (<i>Requires coursework approval by Admissions</i>) Ft. Stewart Intrance Year: 20 Transient (Currently enrolled at another college and taking classes at STC) Savannah
SECTION 8 PROGRAM INFORMATION
Program of Study (choose ONE from program list):
SECTION 9 HIGH SCHOOL/GED INFORMATION
Savannah Technical College does not accept special education diplomas or certificates of completion. All secondary schools must have appropriate accreditation for acceptance. Check one: Graduated from high school Date of Graduation High School/Location Date of Completion Date of Completion Ourrently attending Adult Literacy/GED classes
Currently enrolled High School student Name of High SchoolGraduation year
SECTION 10 COLLEGE INFORMATION (DO NOT omit colleges) (List all previous colleges, universities, and technical schools attended, including STC) School Dates Attended Type of Degree Received to
Official transcripts from ALL previously attended schools must be received by Savannah Technical College in a sealed envelope from the issuing institution. All foreign transcripts must be evaluated by an approved evaluation agency. All post-secondary institutions must have appropriate accreditation for acceptance.

By signing this application, I acknowledge and agree with the statements set forth below:

- I certify that the foregoing information contained in the application is true and correct.
- I understand that by signing this application, I have incurred a \$20.00 application fee and that fee is non-refundable.
- All materials submitted for application become the property of Savannah Technical College and will not be returned to the applicant.
- I give permission for my likeness, voice, or comments to be used in any promotional item on behalf of Savannah Technical College or the Technical College System of Georgia.
- I give permission for STC to release information to potential employers as part of the job placement service provided by the college.
- I agree to abide by the policies and procedures set forth in the Savannah Technical College catalog.
- I understand that Savannah Technical College is not liable for any emergency medical attention provided or for charges incurred from such.
- I authorize Savannah Technical College to deduct all tuition and applicable fees (including, but not limited to, individual course testing fees, malpractice insurance, etc.) from my financial aid (federal, state, and institutional grants, scholarships, and loans) as appropriate.
- I understand that should I earn any award (associate degree, diploma, or certificate) at Savannah Technical College, the college may process that award without notifying me.
- I give Savannah Technical College permission to contact me at the telephone numbers I have provided via any means, including text message or voice.

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 dismissal from the college.

Applicant's Signature ____

Date_____

Savannah Technical College is accredited by the Commission on Colleges of the Southern Association of Colleges and Schools, 1866 Southern Lane, Decatur, GA 30033 (404.679.4500) to award the associate degree. Savannah Technical College does not discriminate on the basis of race, color, creed, national or ethnic origin, gender, religion, disability, age, political affiliation or belief, disabled veteran, veteran of the Vietnam Era or citizenship status. As required by law, graduation rates and crime statistics can be found on our website at www.savannahtech.edu.

Savannah Technical College's designated OCR and Section 504/Americans with Disabilities Act Coordinator for the Savannah and Crossroads Campus is the Counselor/Coordinator of Special Populations located in the Administration Building, Savannah Campus, Room 1132, 912.443.5717; For the Liberty Campus and Ft. Stewart site, contact the Campus Dean for Student Affairs, Liberty Campus, Room 100B, 912.408.3024; For the Effingham Campus, contact the Campus Dean for Student Affairs, Effingham Campus, Room 118, 912.754.2879. The designated Title VI/Discrimination and Title IX/Equity/Sexual Harassment Coordinator is the Registrar located in Room 1148 of the Administration Building, Savannah Campus, 912.443.5708.

Visit www.savannahtech.edu for a current listing of available programs

Crossroads

190 Crossroads Parkway Savannah, GA 31407 912.443.3010 Effingham 2890 Hwy. 21 South Rincon, GA 31326 912.754.2880 Fort Stewart 100 Knowledge Drive Ft. Stewart, GA 31314 912.408.2430 Liberty 100 Technology Drive Hinesville, GA 31313 912.408.3024 Savannah 5717 White Bluff Road Savannah, GA 31405 912.443.5700



Application for Admission/Readmission

PLEASE CHOOSE ONE OF THE FOLLOWING:

Check all that apply:					
□ PAID \$20.00 NON-REFUNDABLE A (Fee is charged regardless of enro.					
□ SUBMITTED PROOF OF LAWFUL (Copy of State Driver's License or -					
Document used for Lawful Presence:	STAFF INITIALS:				
ADMISSIONS UPDATE (Applied but r.	not vet attended)				
Check all that apply:	···· , · · · ··· · · · · · · · · · · ·				
	APPLICATION FEE FOR PREVIOUS TERM				
□ SUBMITTED ALL TRANSCRIPTS A (If not, must request transcripts an	AND DOCUMENTS WITH PREVIOUS APPLICATION ad complete application process)				
SUBMITTED PROOF OF LAWFUL PRESENCE WITH PREVIOUS APPLICATION (If not, must attach a copy of current State Driver's License or State Identification Card)					
For a complete list of acceptable documents, visit \underline{w}	www.savannahtech.edu and select the Lawful Presence tab under Admissions				
READMIT STUDENT					
Check all that apply:					
PREVIOUSLY ENROLLED WHILE (Must submit official final high school)					
RETURNING FROM ACADEMIC SU (Must meet with Academic Advisor)	USPENSION r for Appeal and complete Financial Aid Appeal, if applicable)				
□ HAVE NOT ATTENDED CLASSES (Must resubmit all documents and	IN THE LAST FIVE YEARS may be required to take placement exam)				
□ HAVE NOT ATTENDED CLASSES (Must attend an in-person orientation)					
FOR OFFICE USE ONLY:					
STUDENT ID: DATE	RECEIVED: STAFF INITIALS:				