



# ADMISSIONS APPLICATION

Enrollment Services Office, Building 17 • 4500 Steilacoom Blvd SW, Lakewood WA 98499  
Phone: 253-589-5666 • Email: [studentrecords@cptc.edu](mailto:studentrecords@cptc.edu) • Website: [www.cptc.edu](http://www.cptc.edu)

To comply with federal laws, we are required to ask for your Social Security Number (SSN) or Individual Taxpayer Identification Number (ITIN). This information is used for several purposes: to administer financial aid, to verify academic records, to conduct research, and to report payments you made that may qualify you for a tax credit or a tax deduction on your income tax return. In keeping with state and federal law, the college will protect your SSN/ITIN from unauthorized use and disclosure. If you do not disclose your SSN/ITIN, you will not be denied admissions or enrollment to the college; however, you may be subject to an IRS penalty of \$50.

Please provide your legal sex as denoted on your birth certificate or driver's license per WAC 246-490-075 or WAC 308-104-0150. Gender Identity is collected after admission to the college and in student self-service.

<b>ctcLink ID #</b>		<b>Previous Student ID # (if applicable)</b>		
*Required				
<b>BIO - DEMO INFORMATION</b>				
<b>Title</b>	<b>First Name *</b>	<b>Middle Name</b>	<b>Last Name *</b>	<b>Suffix</b>
<b>Social Security Number/ITIN</b>		<b>Date of Birth (mm/dd/yyyy) *</b>	<b>Sex</b> Female      Male      Not Exclusively Female/Male	
<b>ADDRESS</b>				
<b>Address Type *</b> <input type="checkbox"/> Home <input type="checkbox"/> Mailing <input type="checkbox"/> Temporary <input type="checkbox"/> Billing <input type="checkbox"/> Other				
<b>Address (Street or P.O. Box) *</b>			<b>Apartment / Unit #</b>	
			<b>City *</b>	<b>State *</b> <b>Zip *</b>
<b>CONTACT INFORMATION</b>				
<input type="checkbox"/> Mobile <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> Business <input type="checkbox"/> Other		<b>Phone (area code)</b>		<b>Ext.</b>
		<b>Phone (area code)</b>		<b>Ext.</b>
<b>EMAIL INFORMATION</b>				
<input type="checkbox"/> Home <input type="checkbox"/> Business <input type="checkbox"/> Campus <input type="checkbox"/> Other		<b>Email Address *</b>		
<b>EMERGENCY CONTACT INFORMATION</b>				
<b>Emergency Contact Full Name</b>		<b>Emergency Contact Phone (area code)</b>		<b>Relationship</b>
<b>PROGRAM/PLAN INFORMATION</b>				
<b>Student Type *</b> First Year Reapplying/Returning Running Start Youth Technical High School Transitional Studies International Student Continuing Education	<b>Award Type *</b> Certificate      High School Diploma/Completion Associate      Non-Award Seeking Baccalaureate      Other: _____		<b>Enrollment Status *</b> <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time  <input type="checkbox"/> Other	<b>Quarter &amp; Year Plan Start *</b> <input type="checkbox"/> Summer <input type="checkbox"/> Fall <input type="checkbox"/> Winter <input type="checkbox"/> Spring 20_____
	<b>Plan of Study *</b>			
<b>PROGRAMS OF STUDY AT CPTC</b>				
Clover Park Technical College offer over 100 degrees and certificates in over 40 programs for you to choose from.  Visit our website at <a href="http://www.cptc.edu/programs/schools">www.cptc.edu/programs/schools</a> .				

**ACADEMIC HISTORY**

Last <u>High School</u> Attended *		City *	State *
Dates Attended (mm/dd/yyyy) * to	Did you Graduate? * <input type="checkbox"/> No <input type="checkbox"/> Yes, provide graduation date (mm/dd/yyyy)		Do you have a? <input type="checkbox"/> High School Diploma <input type="checkbox"/> GED
Last <u>College/University</u> Attended		City	State
Dates Attended (mm/dd/yyyy) to	Did you Graduate? <input type="checkbox"/> No <input type="checkbox"/> Yes, provide graduation date (mm/dd/yyyy) _____		

**ETHNICITY INFORMATION**

Our system is committed to racial equity and equal opportunity for all students. We collect information on race, ethnicity, and other student demographic data to measure our progress and guide our efforts to achieve these goals. Response or non-response to this section will not affect your consideration for admission.

Are you Hispanic or Latino? ☐ Yes ☐ No

What is your race? Select one or more

<input type="checkbox"/> WHITE	<input type="checkbox"/> HISPANIC / LATINO		<input type="checkbox"/> AMERICAN INDIAN / ALASKA NATIVE		
	<input type="checkbox"/> Argentinian	<input type="checkbox"/> Spanish-American	<input type="checkbox"/> Alaskan Athabaskans	<input type="checkbox"/> Hopi	<input type="checkbox"/> Shoshone
<input type="checkbox"/> BLACK / AFR AMERICAN	<input type="checkbox"/> Central American	<input type="checkbox"/> Spanish-Mexican	<input type="checkbox"/> Alaska Native	<input type="checkbox"/> Iroquois	<input type="checkbox"/> Shoshone Bannock Tribes
<input type="checkbox"/> African American	<input type="checkbox"/> Chicana/Chicano/Chicanx	<input type="checkbox"/> Sudamericana/Sudamericano/Sudamericanx	<input type="checkbox"/> Aleutian	<input type="checkbox"/> Jamestown Sklallam Tribe	<input type="checkbox"/> Sioux
<input type="checkbox"/> Black	<input type="checkbox"/> Chilean	<input type="checkbox"/> Tejano	<input type="checkbox"/> American Indian	<input type="checkbox"/> Kalispel Tribe of Indians	<input type="checkbox"/> Skokomish Indian Tribe
	<input type="checkbox"/> Colombian	<input type="checkbox"/> Uruguayan	<input type="checkbox"/> Apache	<input type="checkbox"/> Kiowa	<input type="checkbox"/> Snoqualmie Indian Tribe
<input type="checkbox"/> NATIVE HAWAIIAN/ OTHER PAC ISLND	<input type="checkbox"/> Costa Rican	<input type="checkbox"/> Venezuelan	<input type="checkbox"/> Bannock	<input type="checkbox"/> Klamath Tribes	<input type="checkbox"/> Spokane Tribe of Indians
<input type="checkbox"/> Guamanian/Chamorro	<input type="checkbox"/> Cuban		<input type="checkbox"/> Blackfoot	<input type="checkbox"/> Kootenai Tribe	<input type="checkbox"/> Squaxin Island Tribe
<input type="checkbox"/> Hawaiian	<input type="checkbox"/> Dominican		<input type="checkbox"/> Cherokee	<input type="checkbox"/> Lower Elwha Klallam Tribe	<input type="checkbox"/> Stillaguamish Tribe of Indians
<input type="checkbox"/> Samoan	<input type="checkbox"/> Ecuadorian		<input type="checkbox"/> Cheyenne	<input type="checkbox"/> Lumbee	<input type="checkbox"/> Suak Suiattle Indian Tribe
<input type="checkbox"/> Other Pacific Islander	<input type="checkbox"/> El Salvadorian		<input type="checkbox"/> Chickasaw	<input type="checkbox"/> Lummi Nation	<input type="checkbox"/> Suquamish Tribe
	<input type="checkbox"/> Galapagos Islander		<input type="checkbox"/> Chippewa	<input type="checkbox"/> Makah Tribe	<input type="checkbox"/> Swinomish Indian Tribal Community
<input type="checkbox"/> ASIAN	<input type="checkbox"/> Guajira/Guajiro/Guajirx		<input type="checkbox"/> Choctaw	<input type="checkbox"/> Muckleshoot Indian Tribe	<input type="checkbox"/> Tlingit
<input type="checkbox"/> Asian Indian	<input type="checkbox"/> Guatemalan		<input type="checkbox"/> Coeur d Alene Tribe	<input type="checkbox"/> Navajo	<input type="checkbox"/> Tohono O'Odham
<input type="checkbox"/> Chinese	<input type="checkbox"/> Hispanic		<input type="checkbox"/> Comanche	<input type="checkbox"/> Nez Perce Tribe	<input type="checkbox"/> Tulalip Tribes
<input type="checkbox"/> Cambodian	<input type="checkbox"/> Honduran		<input type="checkbox"/> Conf Salish & Kootenai Tribes	<input type="checkbox"/> Nisqually Indian Tribe	<input type="checkbox"/> Upper Skagit Indian Tribe
<input type="checkbox"/> Filipino	<input type="checkbox"/> La Raza		<input type="checkbox"/> Conf Tribes/Bands of Yakama Nation	<input type="checkbox"/> Nooksack Indian Tribe	<input type="checkbox"/> Yaqui
<input type="checkbox"/> Hmong	<input type="checkbox"/> Latina/Latino/Latinx		<input type="checkbox"/> Conf Tribes of Chehalis Reservation	<input type="checkbox"/> Osage	
<input type="checkbox"/> Japanese	<input type="checkbox"/> Mestiza/Mestizo/Mextiz		<input type="checkbox"/> Conf Tribes of Colville Reservation	<input type="checkbox"/> Paiute	
<input type="checkbox"/> Korean	<input type="checkbox"/> Mex-Amer, Mexican		<input type="checkbox"/> Conf Tribes of Grand Ronde	<input type="checkbox"/> Pima	
<input type="checkbox"/> Laotian	<input type="checkbox"/> Morena		<input type="checkbox"/> Conf Tribes of Siletz Indians	<input type="checkbox"/> Port Gamble Sklallam Tribe	
<input type="checkbox"/> Mienh	<input type="checkbox"/> Nicaraguan		<input type="checkbox"/> Conf Tribes of Umatilla	<input type="checkbox"/> Potawatomi	
<input type="checkbox"/> Other - Asian	<input type="checkbox"/> Nuevo Mexicano		<input type="checkbox"/> Conf Tribes of Warm Springs	<input type="checkbox"/> Pueblo	
<input type="checkbox"/> Thai	<input type="checkbox"/> Other - Hispanic		<input type="checkbox"/> Cowlitz Indian Tribe	<input type="checkbox"/> Puget Sound Salish	
<input type="checkbox"/> Vietnamese	<input type="checkbox"/> Panamanian		<input type="checkbox"/> Cree	<input type="checkbox"/> Puyallup Tribe	
	<input type="checkbox"/> Paraguayan		<input type="checkbox"/> Creek	<input type="checkbox"/> Quileute Tribe	
<input type="checkbox"/> OTHER NOT LISTED	<input type="checkbox"/> Peruvian		<input type="checkbox"/> Crow	<input type="checkbox"/> Quinault Indian Nation	
<input type="checkbox"/> _____	<input type="checkbox"/> Puerto Rican		<input type="checkbox"/> Delaware	<input type="checkbox"/> Samish Indian Nation	
<input type="checkbox"/> _____	<input type="checkbox"/> South American		<input type="checkbox"/> Eskimo	<input type="checkbox"/> Seminole	
	<input type="checkbox"/> Spanish		<input type="checkbox"/> Hoh Indian Tribe	<input type="checkbox"/> Shoalwater Bay Indian Tribe	

SUPPLEMENTAL QUESTIONS	
Have you been in Washington State, federal, or tribal foster case for at least one day since your 13th birthday? Former Foster Youth may qualify for educational benefits and support services. *	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has either of your parents earned a High School Diploma? * <input type="checkbox"/> Prefer not to answer	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has either of your parents earned a bachelor's (4-year) degree? * Prefer not to answer	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you currently employed? *	<input type="checkbox"/> Yes <input type="checkbox"/> No
If employed, are you employed full-time? *	<input type="checkbox"/> Yes <input type="checkbox"/> No
If not employed, are you seeking employment? *	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you an active-duty member of the U.S. Armed Forces of Washington or National Guard? *	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you the spouse or dependent of an active-duty military person stationed in Washington or of the National Guard? *	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you separated from active-duty in the last 12 months? *	<input type="checkbox"/> Yes <input type="checkbox"/> No
Veterans and/or their dependents may qualify for educational benefits. Please indicate if you would like additional information. *	<input type="checkbox"/> Yes <input type="checkbox"/> No

**NON-DISCRIMINATION STATEMENT:** Clover Park Technical College does not discriminate on the basis of race, color, national origin, age, perceived or actual physical or mental disability, pregnancy, genetic information, sex, sexual orientation, gender identity, marital status, creed, religion, honorably discharged veteran or military status, or use of a trained guide dog or service animal. For inquiries please contact Title IX coordinator James Neblett, Associate Vice President for Human Resources & Culture, 253-589-5533, james.neblett@cptc.edu; or Section 504/disability coordinator Sarah Addington Manager of Student Disability Services, 253-589-5755, sarah.addington@cptc.edu. All offices are located in Building 17, 4500 Steilacoom Blvd SW, Lakewood, WA 98499.

CPTC non-discrimination statement is available in other languages at [www.cptc.edu/non-discrimination](http://www.cptc.edu/non-discrimination).

#### ACKNOWLEDGEMENT

Student Signature	Date

# Washington State Higher Education Residency Affidavit



People who are eligible to sign this affidavit pay in-state (resident) tuition and fees. They also meet residency requirements for state financial aid programs. Check your school's residency website or contact the residency office for submission instructions. For private institutions, check your school's financial aid website or contact the financial aid office.

## Eligibility Requirements

To be eligible to sign this affidavit, you must:

- Earn a high school diploma, GED, or diploma equivalent before your first term at the college determining residency, **and**
- Maintain a primary residence in Washington for at least 12 consecutive months immediately before your first term at the college determining residency.

## Applicant Information

**Name**

**Date of Birth**

(Month/Day/Year)

**ctcLink ID Number**

(if applicable)

## Certification

If you meet the eligibility requirements above, you must also sign this affidavit to qualify for residency. The affidavit is a promise between you and the institution determining residency. Please certify the following statement by signing below.

I certify that, by the official start date of my first term at the college determining residency, I will have met the eligibility requirements on this affidavit form and that one of the following is true:

- I will file an application to become a permanent resident of the United States as soon as I am eligible to apply. I am also willing to engage in activities designed to prepare me for citizenship, including citizenship or civics review courses, or
- I am a U.S. citizen, U.S. national, or U.S. permanent resident.

**Signature**

**Date**

**Place**

(City, State)