



For Office Use Only Receipt No. Former Student ()

WAYCROSS CAMPUS • 1701 CARSWELL AVE • WAYCROSS, GA 31503 • PHONE (912) 287-6584
ALMA CAMPUS • 101 WEST 17TH ST • ALMA, GA 31510 • PHONE (912) 632-0951
TOLL FREE (877) ED AT OTC

APPLICATION FOR ADMISSION

Complete and return with a \$20 non-refundable application fee (check or money order)
Important: All sections must be completed. Incomplete applications will not be accepted.

Social Security Number, Today's Date, Last Name, First Name, Address, City, State, Zip, County, Home Phone Number, Business Phone Number, Cell Phone Number, Email

RESIDENCY DATA

Are you a U.S. Citizen? If NO, what Visa type and/or Resident Alien number Are you applying for in-state tuition? Are you under 24 years of age? If YES, did your parents or legal guardian claim you on their most recent Federal tax return? If YES, what is the state of legal residence of the parent (s) or legal guardian who claimed you? Has this person lived in that state for the last 12 consecutive months? If you are over 24 (or if you are under 24 and no one claimed you on the most recent tax return), have you been a Georgia Resident for the last 12 consecutive months?

ENTRANCE DATA Check one:

Campus: Waycross Alma Beginning Term: Fall Semester Spring Semester Summer Semester Section: Day Evening Type of Award: Associate Degree Diploma Program Technical Certificate Other

Program or Course for which you are applying:

ETHNIC/RACIAL BACKGROUND (optional and requested for purpose of reporting to Federal compliance agencies only and will not be used in determining admission status)

Are you Hispanic/Latino (of Cuban, Puerto Rican, South or Central American, or other Spanish culture or origin) Race: (select one or more) American Indian or Alaskan Native Asian Black, Non-Hispanic Native Hawaiian or Pacific Islander White Sex: Male Female Date of Birth

EDUCATIONAL DATA (This information is required, not optional)

Did you graduate from high school? Yes No If no, actual grade completed _____

(Certificates of Completion and Special Education Diplomas are not accepted)

School

Name _____ City/State _____ aUSA _____

Did you receive a GED? Yes No City/State _____

(If you have received a high school diploma or GED certificate, please submit a copy with your application. If you have graduated from high school in the last 5 years, you must submit a copy of your high school transcript.)

Students must provide an official transcript from all colleges attended including institutions where you registered for classes, even if classes were dropped, regardless of whether transfer of credit is desired.

College Name	City/State

Continue educational history on an additional sheet if necessary.

EMERGENCY CONTACT

Please provide the name and telephone number of the person who should be contacted in case of an emergency.

Name _____ Relationship _____

Home Phone Number _____ Cell Phone Number _____ Work Phone Number _____

IMPORTANT INFORMATION

PLEASE READ CAREFULLY

WARRANTY STATEMENT

If an employer finds an OTC student to be deficient in specific competencies in a standard curriculum within two years after graduation, the student will be retrained at no cost to the student or employer.

NEWS RELEASE STATEMENT

I, the undersigned, do hereby give permission to Okefenokee Technical College to use my name and/or photograph picturing or naming me in a school/work related situation.

Signature _____ Date _____

I certify that the information I have given is correct to the best of my knowledge. I understand that failure to give accurate and complete information may be sufficient cause for rejection or dismissal. Upon acceptance to Okefenokee Technical College, I agree to abide by the rules, regulations and guidelines as set forth in the Student Handbook. I give OTC permission to award me any certificate, diploma or degree that I complete.

Signature _____ Date _____

Okefenokee Tech is accredited by the Commission on Colleges of the Southern Association of Colleges and Schools and is a unit of the Technical College System of Georgia.

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.

In accordance with the Technical College System of Georgia Policy V.B.3.Residency, each college shall be responsible for the verification of the lawful presence in the United States of every successfully admitted student applying for Georgia resident tuition status as required by state and federal immigration laws.

As set forth in its student catalog, Okefenokee 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 Contact: OTC VP for Student Affairs; Section 504 Contact: OTC Retention Coordinator. Call 912.287.6584 or write 1701 Carswell Avenue, Waycross, GA 31503