CONTINUING EDUCATION APPLICATION FOR ADMISSION

One College Hill Road, Newton, NJ 07860 | 973•300•2223 | admissions@sussex.edu

Complete this application if you are applying for one of the following Continuing Education Programs: Adult Transition Center, English for Speakers of Other Languages, High School Equivalency, or the Learning at College Experience.

Personal Information

First Name *(Legal)*:_____ Last Name *(Legal)*:_____

Suffix (*If applicable*):_____ Maiden/Birth Last Name (*If applicable*):_____

Social Security Number: _____ Birth Date: _____
(Month) (Day) (Year)

Gender: ☐ Male ☐ Female

This information is requested only for reporting to federal and state agencies and academic accrediting associations:

Do you consider yourself to be Hispanic/Latino? ☐ Yes ☐ No

Please select one or more of the following categories to describe yourself (please mark all that apply):

☐ White ☐ Asian ☐ American Indian or Alaska Native
☐ Black or African American ☐ Native Hawaiian or Pacific Islander

Contact Information

Address:_____

City:_____State:_____Zip Code:_____Country:_____

Primary Phone Number: _____ Cell: _____

By supplying your cellphone number here, you authorize the College to send you text messages. You can opt out at any time.

Email Address:_____

Parent/Guardian Email Address *(If applicable)*:_____

Emergency Contact First Name:_____ Last Name:_____

Relationship:_____ Emergency Contact Phone: _____

Candidacy Information

Choose a program of study: ☐ ATC – Adult Transition Center ☐ ESOL – English for Speakers of Other Languages

☐ HSE – High School Equivalency ☐ LACE – Learning at College Experience High School Graduate

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By submitting this form, I (and my Parent/Guardian if I am under 18 years of age) certify to the best of my/our knowledge that the information on this form is correct and I/we understand that falsification may result in dismissal from the College.

I have reviewed the institutions student consumer information: sussex.edu/student-consumer-information

Applicant's Signature: _____ **Date:** _____

Parent/Guardian's Signature (if applicant is under 18 years of age): _____

TITLE IX AND SECTION 504 COMPLIANCE: Sussex County Community College does not discriminate in admissions or access to, or treatment or employment on the basis of race, color, national origin, sex, disability, or age in its programs and activities. The following persons have been designated to handle inquires/complaints regarding non-discrimination policies: Title IX: Stacie Caputo Director of HR, 973-300-2306, scaputo@sussex.edu, Student Center, Rm D313, Sussex Campus and Section 504: Pam Cavanagh, Accessibility Services Coordinator and Generalist Advisor, Administration Bldg, Rm B206 Sussex Campus, 973-300-2153, pcavanagh@sussex.edu.