Sussex County COMMUNITY COLLEGE

APPLICATION FOR ADMISSION

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

If you are an International Student, please complete the International Application for Admission instead. If you are completing this application on behalf of your child, please remember to input their information and not your own. Incomplete applications will not be processed.

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

Citizenship Status: ☐ US Citizen ☐ Non-US Resident *(Fill out International Student Application instead)*

☐ Permanent Resident, Card Number: _____ Card Issued: _____ Birth Country:_____

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

Are you a veteran? ☐ Yes ☐ No If yes, veteran's chapter: _____

If requesting benefits, you must submit your military transcript.

Are you a veteran's spouse or dependent of a disabled veteran? ☐ Yes ☐ No

Contact Information

Address:_____

City:_____State:_____Zip Code:_____Country:_____

Primary Phone Number: _____ Cell: _____

Email Address:_____

Note: You will be issued an official SCCC email address to which all electronic correspondence will be sent.

Parent/Guardian Email Address *(Optional, unless under 18)*:_____

Emergency Contact First Name:_____ Last Name:_____

Relationship:_____ Emergency Contact Phone: _____

Education History

Please indicate your current status: ☐ High School Graduate ☐ Currently enrolled in High School ☐ GED

Were you Homeschooled? ☐ Yes ☐ No

High School Graduation Date *(Approximate)*: _____

Please send official high school transcript or copy of HSE-GED to the Admissions Office at admissions@sussex.edu

List your high school(s) and other colleges attended, if applicable:

Institution Name	State	Degree Earned

Beginning at Sussex

Applying for year_____ ☐ Fall ☐ Winter ☐ Spring ☐ Summer I II III or IV

Which best describes your educational goal at SCCC? *(Check only one)*

- ☐ To earn an Associate Degree/Certificate at SCCC
- ☐ Take courses to transfer to four-year college before earn degree
- ☐ Take courses to improve English, Reading or Math skills
- ☐ Take courses for skills for job or personal enrichment
- ☐ Take courses to transfer to my current institution

Academic Program at SCCC:_____ ☐ Degree ☐ Certificate

See degrees and certificates list of programs available at sussex.edu/academics

Admission Status:

- ☐ First-time Student ☐ Taking Sussex classes while enrolled at another college
- ☐ Transferring from another college ☐ Taking college classes while in high school
- ☐ Previously Attended Sussex

Credit load intent: ☐ Full-time (12 or more credits) ☐ Part-time (11 or fewer credits)

Are you interested in residing at Centenary University during your studies? ☐ Yes ☐ No

Are you interested in participating in Athletics during your studies? ☐ Yes ☐ No

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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:** _____

By signing this application, I am granting permission to Sussex County Community College, its agents and staff to use video and photographs of myself for SCCC promotional /advertising materials without charge. No promises have been made, no consideration is involved for their use.

☐ If I do not want SCCC to use video and photographs of myself, I will inform the Office of Marketing and Public Information.

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.