

APPLICATION FOR ADMISSION – BROOKDALE COMMUNITY COLLEGE

Instructions: Questions followed by an asterisk* are optional. This information does not affect either admission or placement. Your response is voluntary, but will inform Brookdale’s affirmative action policy.

BIOGRAPHICAL DATA

*Social Security Number _____

I choose not to provide my Social Security number. I understand that this will affect my ability to receive Financial Aid and/or receive annual documents used for tax purposes. (A Brookdale Student ID Number will be assigned to you after your application has been processed. Failure to submit your Social Security number will prevent you from retrieving your assigned Brookdale username and login information from our server.)

Last Name _____ First Name _____ M.I. _____

Address _____

City _____ State _____ Zip _____

County of Residence _____ Have you lived in NJ in the past year? Yes No

Day Phone _____ Evening Phone _____

Cell Phone _____ *Date of Birth _____

Personal Email: _____ I choose not to provide my Date of Birth. I understand that this will affect my ability to receive Financial Aid.

Are you a U.S. citizen? Yes No Are you a Veteran of the U.S. Armed Forces? Yes No

*I identify my gender as _____ *Ethnicity Hispanic/Latino Non-Hispanic/Latino

*Race American Indian/Alaskan Native Asian Black or African American Native Hawaiian/Other Pacific Islander White

PROGRAM OF STUDY

Year you plan to begin _____ Starting Term Fall Winterim Spring Summer I Summer II Summer III

Do you plan to be a Degree (regular) student enrolled in a degree or certificate program? Yes No

If YES, what program do you intend to pursue? N/A (see list on last page)

If NO, do you plan to be a Non-degree (special) student Visiting student (matriculated elsewhere) Service Members Opportunity College (SOC) Non-degree English as a Second Language (ESL) student

Do you intend to apply for Financial Aid? (if yes, SSN and DOB are required) Yes No

Is English your first or primary language? Yes No

Would you like to receive information about Brookdale’s University Partnerships? (see information on previous page) Yes No

EDUCATION

High School last attended _____ Highest grade completed _____ Year of graduation _____

City/State of High School _____ Are you a high school student applying for “Fast Start”? Yes No

Do you have an equivalency diploma (GED)? Yes No If yes, from what state? _____

List all colleges and schools attended after high school (Do not omit schools in which no credits were earned. Send transcripts from each.)

School	City & State	Month & Year	Degree
		/ to /	
		/ to /	
		/ to /	

SIGNATURE

I certify that all the answers I have given are correct and accurate. Response is voluntary and the information will be kept confidential. Refusal to provide this information will not subject the applicant to any adverse treatment.

Signature _____ Date _____