

APPLICATION FORM

Application Period: April 15 – June 1 Annually

Please Print

TODAY'S DATE:

LAST NAME	FIRST NAME				
HOME ADDRESS					
HOME or CELL PHONE	US CITIZEN	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
	US LEGAL RESIDENT	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
BIRTHDATE	ELIGIBLE FOR DREAM ACT	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
	GENDER	M	<input type="checkbox"/>	F	<input type="checkbox"/>
EMAIL ADDRESS					
NAME OF CURRENT HIGH SCHOOL & ADDRESS					

PROPOSED COLLEGE OF ATTENDANCE	
Cerritos College	Los Angeles Southwest College
Coastline Community College	Los Angeles Trade-Tech College
East Los Angeles College	Los Angeles Valley College
Glendale College	Moorpark College
Long Beach City College	Oxnard College
Los Angeles City College	Pasadena City College
Los Angeles Harbor College	Santa Monica College
Los Angeles Mission College	Ventura College
Los Angeles Pierce College	West Los Angeles College

PARENT'S NAME (Mother/Father or both or Guardian)

APPLICANT'S SIGNATURE (I certify that all the information provided on this form is accurate.)

Please attach a resume, a transcript from 9th grade through the first semester of the senior year, and a letter of application (details reflected in the eligibility criteria).