

325 NW Turner Davis Drive, Madison, Florida 32340
Phone: 850-973-1622 or 850-973-9405 | Admissions@nfc.edu | Fax: 850-973-1697

1 SOCIAL SECURITY NUMBER _____	2 HAVE YOU PREVIOUSLY ATTENDED NFC? <input type="checkbox"/> YES <input type="checkbox"/> NO* <small>*New Applicants MUST include \$20 Nonrefundable fee</small>																																							
3 LEGAL NAME _____ <div style="display: flex; justify-content: space-between; font-size: small;"> (LAST) (FIRST) (MIDDLE) </div>																																								
4 PRIOR NAMES USED (Maiden) _____	5 PHONE / EMAIL Cell # _____ Email _____ Home # _____ <small>By submitting your cell phone number and email address, you authorize us (opting-in) to send you info. and marketing related texts/emails. Message/data rates may apply. You can unsubscribe at any time.</small>																																							
6 MAILING ADDRESS _____ <div style="display: flex; justify-content: space-between; font-size: small;"> (Street) (APT #) </div> _____ <div style="display: flex; justify-content: space-between; font-size: small;"> (City) (County) (State / Zip Code) </div>																																								
7 EMERGENCY CONTACT INFORMATION Name: _____ Relationship: _____ Phone: _____																																								
THE FOLLOWING INFORMATION IS REQUIRED BY THE U.S. DEPARTMENT OF EDUCATION UNDER TITLE VI OF THE CIVIL RIGHTS ACT OF 1964 AND THE TITLE IX OF THE EDUCATIONAL AMENDMENTS OF 1972 TO BE USED FOR REPORTING PURPOSES AND IS NOT USED IN DETERMINING ADMISSIONS TO NORTH FLORIDA COLLEGE.																																								
8 SEX <input type="checkbox"/> Male <input type="checkbox"/> Female	9 DATE OF BIRTH ____/____/____ <small>(Month/Day/Year)</small>																																							
13 ENTERING TERM <div style="background-color: #cccccc; padding: 2px; text-align: center; margin: 2px;">20</div> ✓ TERM <input type="checkbox"/> FALL (August) <input type="checkbox"/> SPRING (January) <input type="checkbox"/> SUMMER (May)	14 BIRTHPLACE _____ <div style="display: flex; justify-content: space-between; font-size: small;"> City State </div> _____ Nation, if not U.S.																																							
10 CITIZENSHIP <input type="checkbox"/> U.S. Citizen <input type="checkbox"/> Permanent Resident Alien <input type="checkbox"/> Other, Non-citizen VISA type _____ Country of Citizenship if not U.S.: _____ <small>VISA, ALIEN CARD, AND/OR PASSPORT REQUIRED AT ADMISSION</small>	11 RACE <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black/African American <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> White																																							
12 WHAT IS YOUR PRIMARY LANGUAGE? <small>(THE LANGUAGE YOU USE MORE THAN 50% OF THE TIME)</small> <input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> Other: _____																																								
15 ETHNICITY Are you Hispanic or Latino? <input type="checkbox"/> Yes <input type="checkbox"/> No																																								
16 DEGREE OBJECTIVE <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input type="checkbox"/> ASSOCIATE IN ARTS _____ <input type="checkbox"/> ASSOCIATE IN SCIENCE (list the program) _____ <input type="checkbox"/> CREDIT CERTIFICATE (list the program) _____ <input type="checkbox"/> VOCATIONAL CERTIFICATE (list the program) _____ <input type="checkbox"/> BACHELOR OF SCIENCE IN NURSING (must have AS RN degree to apply; \$30 fee) </div> <div style="width: 45%;"> <input type="checkbox"/> TRANSIENT STUDENT home inst. name _____ <input type="checkbox"/> NON-DEGREE SEEKING <input type="checkbox"/> SENIOR CITIZEN (must be 65 or older & DOB must be verified) <input type="checkbox"/> BACHELOR OF APPLIED SCIENCE IN ORGANIZATIONAL MANAGEMENT (must have an AA or AS degree to apply; \$30 fee) </div> </div>																																								
17 EDUCATION BACKGROUND (APPLICANTS WITH SPECIAL DIPLOMAS MUST OBTAIN A GED DIPLOMA BEFORE APPLYING) <div style="display: flex; justify-content: space-between; font-size: x-small;"> <div>DATE RECEIVED/ANTICIPATED</div> <div>High School Name / State / Country</div> </div> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 35%;">HOME SCHOOLED (NOTARIZED AFFIDAVIT REQUIRED)</td> <td style="width: 30%; text-align: center;">____/____/____</td> <td style="width: 35%; text-align: center;">_____</td> </tr> <tr> <td>GED DIPLOMA</td> <td style="text-align: center;">____/____/____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td>STANDARD HIGH SCHOOL DIPLOMA</td> <td style="text-align: center;">____/____/____</td> <td style="text-align: center;">_____</td> </tr> </table> <p>All college credit and certificate applicants must have a Standard or College-ready high school diploma or GED. Please have an official transcript sent from the high school to NFC Admissions. For GED completers, have your official GED transcript with test scores sent to NFC Admissions.</p> <p>List the full names of the colleges and universities previously attended. DO NOT USE ABBREVIATIONS. Failure to list all institutions could result in your application being denied or your admission being rescinded. <i>Use separate sheet if necessary and attach it to the application.</i></p> <p>NOTE: An official transcript from each postsecondary school, college or university you have attended must be sent to Admissions.</p> <table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"> <thead> <tr> <th style="width: 35%;">NAME OF COLLEGE/UNIVERSITY (DO NOT USE ABBREVIATIONS)</th> <th style="width: 15%;">CITY & STATE</th> <th style="width: 15%;">DATES ATTENDED</th> <th style="width: 10%;">HRS EARNED</th> <th style="width: 10%;">DEGREE EARNED</th> <th style="width: 15%;">ELIGIBLE TO RETURN?</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>		HOME SCHOOLED (NOTARIZED AFFIDAVIT REQUIRED)	____/____/____	_____	GED DIPLOMA	____/____/____	_____	STANDARD HIGH SCHOOL DIPLOMA	____/____/____	_____	NAME OF COLLEGE/UNIVERSITY (DO NOT USE ABBREVIATIONS)	CITY & STATE	DATES ATTENDED	HRS EARNED	DEGREE EARNED	ELIGIBLE TO RETURN?																								
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Have you ever been charged with a violation of the law, misdemeanor and/or felony (even if adjudication was withheld) which resulted in, or if still pending, could result in probation, community service, restitution, a jail sentence or the revocation or suspension of your driver's license? **Failure to disclose this information may result in revoking your application or immediate suspension from NFC.** (You are not required to include traffic violations which only resulted in a fine.)

☐ Yes

☐ No

If your answer is YES, you *may* be required to schedule an interview with the Dean of Enrollment and Student Services (or designee) and submit a full statement of relevant facts explaining the final disposition of proceedings. You will only be allowed to register in classes after your background had been reviewed and cleared for registration. **Please allow up to 14 days for the review.**

19 STUDENT NOTIFICATIONS Read the following important notices.

Confidentiality of Student Records: The Family Rights and Privacy Act of 1974 provides that "Directory Information" may be released to the general public upon request unless the student has specially requested in writing that some or all of the information not be released. A form is available upon request from the office of the Registrar.

Student Disabilities: Any student with a disability who wants to request accommodations, assistance, or information should contact Student Disability Services at (850) 973-1611 (TTY).

Collection of Student Social Security Numbers: In compliance with Florida Statute (F.S.) 119.071(5)(a), North Florida College (NFC) issues this notification regarding the purpose for the collection and use of your Social Security Number (SSN). In addition, 119.071(2)(a)(II), F.S., authorizes NFC to collect and use your SSN to perform the College's duties and responsibilities for the following purposes: student record management; identification and verification; tracking (also authorized by 1008.386, F.S.); VA benefits (also mandated by 38 USC 3471); and reporting to authorized agencies of the state and federal government (also authorized by 26 USC 6050S). To protect your identity, NFC will maintain the privacy of your SSN and never release it to unauthorized parties. The College assigns you a unique student identification number which is used for educational purposes at NFC, including access of your college records.

Excess Hours Advisory Statement: Section 1009.286, Florida Statutes, establishes an "excess hour" surcharge for a student seeking a baccalaureate degree at a state university. It is critical that students, including those entering Florida colleges, are aware of the potential for additional course fees. "Excess hours" are defined as hours that go beyond 120% of the hours required for a baccalaureate degree program. For example, if the length of the program is 120 credit hours, the student may be subject to an excess hour surcharge for any credits attempted beyond 144 credit hours (120% x 120).

All students whose educational plan may include earning a baccalaureate degree should make every effort to enroll in and successfully complete those courses that are required for their intended major on their first attempt. Florida college students intending to transfer to a state university should identify a major or "transfer program" early and be advised of admission requirements for that program, including the approved common prerequisites. Course withdrawals and/or repeats, as well as enrollment in courses nonessential to the intended major, may contribute to a potential excess hours surcharge.

20 STUDENT AGREEMENT Read the following statement and sign below.

I certify that the information given in this application is complete and accurate, and I understand that to make false or fraudulent statements within this application or residency statement may result in disciplinary action, denial of admission, and invalidation of credits or degrees earned pursuant to 837.06, Florida Statutes. I certify that I will abide by all the regulations of North Florida College (NFC) and the laws of the State of Florida. I agree that as a condition of my admission, I will not engage in the unlawful manufacture, distribution, dispensation, possession, or use of a controlled substance or alcohol during enrollment at NFC. I further certify that if it becomes necessary for NFC to engage the services of a collection agency or to initiate legal action to collect fees for tuition or any other services provided by NFC, I will be responsible for all costs of collection, including but not limited to reasonable attorneys' fees.

I understand that this application is for admission to the program identified on page 1 and is valid only for the academic year in which I apply. A new application may be required if I wish to change my educational goal.

I also understand and agree that I will be bound by the college's regulations concerning application deadlines and admission requirements. I further agree to the release of any transcript, student record, and test scores to the college (including my ACT Inc., Florida College Entry-Level Placement Test, or SAT-I score reports that the college may request from the College Board, ACT Inc., or another Florida public college or university.) I understand and agree that I will be bound by the College's regulations as published in the college catalog and the student handbook.

I hereby authorize NFC to release or request electronically my transcript and placement scores to or from a Florida college or university. I also authorize NFC to electronically request transcripts on my behalf. Should any of the information I have given change prior to or during my enrollment at NFC, I shall immediately notify the Office of the Registrar in writing. I understand that the \$20 payment I submit with this application is a **nonrefundable fee**.

Signature of Applicant

_____/_____/_____
Date