



## CANDIDATE

High School graduation year: \_\_\_\_\_ Name of High School: \_\_\_\_\_

Do you have a General Equivalency Diploma (GED)?  Yes  No

Year: \_\_\_\_\_ Town/State: \_\_\_\_\_

Do you have a High School Diploma?  Yes  No

Did you graduate from College?  Yes  No Date of Graduation: \_\_\_\_\_

How did you hear about RCC?  Subway Advertising  Mass.Coll./Univ.  Friend/Family  Newspaper  
 Radio/TV  College Fair  Community Agency  RCC Student/Alumni  RCC Staff/Faculty  
 High School Visit  Church  Other \_\_\_\_\_

## CANDIDACY

Program of Interest (Please choose from list on page 4): \_\_\_\_\_

Year of Entrance: \_\_\_\_\_ Term:  Fall  Spring  Summer I  Summer II

Location: Main Campus  Part Time  Full Time

Type of Candidacy:  New Student  Readmit  Transfer  Joint Admission  
 Non Degree  International  Dual Enrollment  Tech Prep  
(High School Students Only)

## ATTRIBUTES

Is English your first language?  Yes  No

**Education Goals:**  Associate Degree  Personal Development Course(s)  
*(Please check one)*  Certificate  Transfer without completion of an Associate Degree  
 Upgrade Job Skills  Transfer to 4 year College with an Associate Degree  
 Improve English Skills Proficiency  Undecided

### Family Educational Background:

Do either of your parents hold a Bachelor's Degree or Higher?  Yes  No

### Athletic Interest:

Do you wish to play sports at RCC?  Yes  No

If yes, which sport(s)?  Tennis  Basketball  Baseball  Track  
 Cheerleading  Soccer  Other \_\_\_\_\_

### Emergency Contact:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

I acknowledge that all documents submitted become the property of the College and will not be returned to me. I understand programs that involve working with children, the disabled, elderly, or include a clinical affiliation may require a Criminal Offender Record Information Check (CORI) or Sexual Offender Record Information Check (SORI). A positive CORI or SORI may prevent students from entering into certain programs, including Nursing, Radiologic Tech, and Early Child Education or securing a license to practice.

I hereby certify that all information stated in this application is complete and accurate, and I understand that falsification or omission of information or submitting false records to the College may result in disqualification or dismissal. I understand this application for admission will not be complete until all documents are submitted to the Office of Admissions. I give permission to Roxbury Community College to verify my educational record(s).

I hereby give permission/consent to release my education records to Roxbury Community College and I give permission to Roxbury Community College to contact me via telephone.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Guardian (if under 18): \_\_\_\_\_

**Mail To:** RCC Admission Office, 1234 Columbus Avenue, Roxbury, MA 02120

*(Complete Next Page)*

## MASSACHUSETTS COMMUNITY COLLEGES - IN-STATE TUITION ELIGIBILITY FORM

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_  
 Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 SSN# or Student I.D. Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 Are you a U.S. Citizen?     Yes     No    Please state your immigration status in detail: \_\_\_\_\_

### Please check the in-state or reduced-tuition eligibility category that applies to you:

- For Community College applicants:** I have been a Massachusetts resident for six (6) continuous months and intend to remain here.

As proof of my intent to remain in Massachusetts, I possess at least 2 of the following documents, which I shall present to the institution upon request. These documents are dated within one (1) year of the start date of the academic semester for which I seek to enroll (except possibly for my high school diploma). The institution reserves the right to make any additional inquiries regarding the applicant's status and to require submission of any additional documentation it deems necessary. **Please check those documents you possess as proof of your intent to remain in Massachusetts.**

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Driver's license                                      | <input type="checkbox"/> Mass. high school diploma    | <input type="checkbox"/> Employment pay stub       |
| <input type="checkbox"/> Car registration                                      | <input type="checkbox"/> Voter registration           | <input type="checkbox"/> State/Federal tax returns |
| <input type="checkbox"/> Utility bills   | <input type="checkbox"/> Signed lease or rent receipt | <input type="checkbox"/> Military home of record   |
| <input type="checkbox"/> Record of parents' residency for unemancipated person | <input type="checkbox"/> Other _____                  |  |

- I am an eligible participant in the New England Board of Higher Education's Regional Student Program.
- I am a member of the armed forces (or spouse or unemancipated child) on active duty in Massachusetts.

### Certification of Information

I certify that this information is true and accurate. I understand that any misrepresentation, omission, or incorrect information shall be cause for disciplinary action up to dismissal, with no right of appeal or to a tuition refund.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature (Applicant is Under 18 Years Old): \_\_\_\_\_ Date: \_\_\_\_\_

### **FOR OFFICIAL USE ONLY - DO NOT WRITE IN THIS BOX**

I have reviewed the above information in order to determine this individual's eligibility to receive the in-state tuition rate. Based on my review, I have determined that this individual:

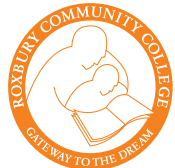
\_\_\_\_\_ IS eligible for the in-state tuition rate.

\_\_\_\_\_ IS NOT eligible for the in-state tuition rate.

\_\_\_\_\_ I am unable to make a determination at this time. The following additional information has been requested from the applicant: \_\_\_\_\_

Authorized College Personnel: \_\_\_\_\_ Date: \_\_\_\_\_

*(Complete Next Page)*



# Roxbury Community College

## ACADEMIC PROGRAMS *(Please Select Only One)*

### ASSOCIATE OF ARTS DEGREE

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Arts and Humanities <sup>3</sup>               | <input type="checkbox"/> Broadcast Media Technology                                   | <input type="checkbox"/> Liberal Arts <sup>3</sup>     |
| <input type="checkbox"/> Arts and Humanities: Musical Arts <sup>3</sup> | <input type="checkbox"/> Business Administration <sup>3</sup>                         | <input type="checkbox"/> Mathematics <sup>3</sup>      |
| <input type="checkbox"/> Arts and Humanities: Theatre Arts <sup>3</sup> | <input type="checkbox"/> English <sup>3</sup>   | <input type="checkbox"/> Physical Science <sup>3</sup> |
| <input type="checkbox"/> Arts and Humanities: Visual Arts <sup>3</sup>  | <input type="checkbox"/> Environmental Management & Pollution Prevention <sup>3</sup> | <input type="checkbox"/> Pre-Engineering <sup>3</sup>  |
| <input type="checkbox"/> Africana Studies                               | <input type="checkbox"/> Health Careers   | <input type="checkbox"/> Social Science <sup>3</sup>   |
| <input type="checkbox"/> Biological Science <sup>3</sup>                | <input type="checkbox"/> International Business <sup>3</sup>                          |  |
| <input type="checkbox"/> Biological Science: Laboratory Animal Care     |   |  |

### ASSOCIATE OF SCIENCE DEGREE

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Accounting <sup>3</sup>                   | <input type="checkbox"/> Computer Science <sup>3</sup> | <input type="checkbox"/> Nursing (ADN) <sup>1,2,4</sup>         |
| <input type="checkbox"/> Biotechnology                             | <input type="checkbox"/> Criminal Justice <sup>3</sup> | <input type="checkbox"/> Office Administration                  |
| <input type="checkbox"/> Business Management - Entrepreneurs       | <input type="checkbox"/> Early Childhood Education     | <input type="checkbox"/> Radiologic Technology <sup>1,2,4</sup> |
| <input type="checkbox"/> Business Management                       | <input type="checkbox"/> Microcomputer Applications    | <input type="checkbox"/> Web Technologies                       |
| <input type="checkbox"/> Computer Information Systems <sup>3</sup> | <input type="checkbox"/> Network Administration        |   |

### CERTIFICATES

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Accounting                    | <input type="checkbox"/> Microcomputer Applications                | <input type="checkbox"/> Physical Education - Personal Training         |
| <input type="checkbox"/> Biotechnology: Biomufacturing | <input type="checkbox"/> Office Technology - Office Administration | <input type="checkbox"/> Physical Education - Strength and Conditioning |
| <input type="checkbox"/> Broadcast Media Technology    | <input type="checkbox"/> Paralegal Studies                         | <input type="checkbox"/> Practical Nursing <sup>1,2,4</sup>             |
| <input type="checkbox"/> Computer Information Systems  | <input type="checkbox"/> PC Support Specialist                     | <input type="checkbox"/> Web Technologies                               |
| <input type="checkbox"/> Engineering Design: AutoCAD   | <input type="checkbox"/> Physical Education - Coaching             |   |
| <input type="checkbox"/> Medical Office Specialist     | <input type="checkbox"/> Physical Education - Group Exercise       |   |

<sup>1</sup> This Program requires prerequisites.

<sup>2</sup> This is a competitive admissions program. The office of admissions can provide you with specific details regarding additional requirements.

<sup>3</sup> Approved majors for Joint Admissions at RCC.

<sup>4</sup> Students who select Nursing (ADN), Practical Nursing (PN), and Radiologic Technology will be placed into the Health Careers Program while they are completing their pre-requisites or formally accepted into one of these programs.

### NON-DEGREE \_\_\_\_\_

Students who select Non-Degree are interested in taking a course(s) and are not interested in seeking a Degree or Certificate. Non-Degree Students are unable to receive financial Aid and may take up to twelve college credits.

Roxbury Community College awards millions of dollars in federal, state and institutional financial aid each year to eligible students. Many students, however, miss out because they do not think they are eligible and do not complete the Free Application for Federal Student Aid (FAFSA). To apply for financial aid, students must complete the FAFSA available on the Federal Financial Aid Web site at [www.fafsa.ed.gov](http://www.fafsa.ed.gov). Financial Aid can be used to pay for tuition, fees, books, transportation, and other educational expenses.

We strongly encourage you to complete the FAFSA. If you need help with your financial aid application or college financial planning, our Financial Aid Office has counselors who can assist you. Please call (617)427-0060 ext. 5322.

Please select the option below that best describes your plans to complete a FAFSA. This information will have no impact on whether you are admitted to the college.

- I have already applied for financial aid
- I plan to apply for federal, state and institutional financial aid and am prepared to complete the FAFSA at [www.fafsa.ed.gov](http://www.fafsa.ed.gov).
- I plan to apply for federal, state and institutional financial aid, but I need help from the Financial Aid Office to complete the FAFSA.
- I do not plan to apply for federal, state or institutional financial aid at this time.