

New OIP Student Info

Stu	udent Name						
	Last (Surname)		First		Middle	e Initial	
Stu	udent ID Number	Birthdate		_ MM-DD-Y	YYY		
Street Address					Apt. #		
Cit	у	State _		Zip Code			
Em	nail Address						
Cell Phone		Home Phone					
Pre	evious Name(s)						
	Male Female	First quarter:	SUM [FALL W	TR SPR	20	
A.	Services are available for students who have special needs due to a disability. Would you like our staff to contact you with more information? Yes No						
В.	What is your visa type? If your visa type is B, F, J, M, or TN you must go through the <u>International Student Services</u> Office. If your visa type is A, E, G, H, I, K, L, or R the <u>Enrollment Services</u> Office will assist you. If you do not have a visa, what is your status: I am a US citizen Other (please explain)						
C.	Last High School attended	State/Country			Years Attended: Graduated?	to □Yes □No	
	Last college, voc/tech, university attended	State/Country	,		Years Attended: Graduated?	to □Yes □No	

Turn over for more questions

Rev. 2/2/2017

	Which race(s) do you consider yourself to be? (Optional) (Mark up to two boxes)							
	□ Alaska Native (015) □ Cambodian (604) □ American Indian (597)* □ Chinese (605) □ Arabian (801) □ Eskimo (935) □ Asian, Indian (600) □ Fijian (676) □ Asian, Other (621) □ Filipino (608) □ Black or African American (872) □ Hawaiian, Native	☐ Indonesian (610) ☐ Samoan (655) ☐ Japanese (611) ☐ Taiwanese (606) ☐ Korean (612) ☐ Thai (618) ☐ Nepali (635) ☐ Tlingit (017) ☐ Pacific Islander, Other (681) ☐ Vietnamese (619) (653) ☐ Pakistani (616) ☐ White (800)						
D.	Other Race:							
	* If American Indian, please list name of enrolled or principal tribe:							
	Are you of Spanish/Hispanic origin? (Optional) (Please mark only one box) No, (not Spanish/Hispanic) (999) Yes, Mexican, Mexican-Am., Chicano (722) Yes, Spanish (731) Yes, Central American (704) Yes, Puerto Rican (727) Yes, Cuban (709) Yes, South American (729) Yes, other Spanish/Hispanic:							
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E.	How long do you plan to attend Edmonds Community Colle One quarter (11) Two quarters (12) One year (13)	ege? Up to two years, no degree planned (14) Long enough to complete a degree (15) Don't know (16)						
	What is your current work status while attending college? Not employed, but seeking employment (15) Not employed, not seeking employment (16)							
	What was your most recent educational level completed? Less than high school graduation (11) GED (12) High school graduate (13) Some post high school, but no degree or certificate	Certificate (less than two years) (15) Associate degree (16) Bachelor's degree or above (17)						
	Please check the one that applies to you. I am: a single parent with children or other dependents in your care (11) a couple with children or other dependents in your care (12) without children or other dependents in your care (13)							
F.	I herby certify under penalty of perjury under the laws of the state of Washington RCW 9A.72.085 that to the best of my knowledge, all statements on this form are true and correct. Signature:							
	OFFICE USE ONLY							
	SSN/NAME CHECK RESIDENCY CODE FEE PAY STATUS TYPE COUNTR CODE							
P	Print Name	Pg. 2 Student ID Number						