

RUNNING START APPLICATION FOR ADMISSION



CLARK COLLEGE
RUNNING START
 1933 FORT VANCOUVER WAY
 VANCOUVER, WA 98663-3598
 360-992-2842 | WWW.CLARK.EDU/RUNNINGSTART

Quarter you plan to start at Clark College:

- Fall (September) Winter (January)
 Spring (March/April) Year 20_____

Answer all the questions, print two copies, and sign forms. Then bring the forms to the Welcome Center. Shaded area for office use only

*Social Security Number (optional, see note at bottom): <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>			Assigned Student Identification Number: <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		
Last Name		First	Middle Initial		Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male
Address		Apt. No.	Day Phone ()		
City	State	Zip	Evening Phone ()		
Date of Birth	Email Address		Previous Last Name		

Have you spent at least one year in Washington State foster care since your 16th birthday? Yes No
 Has either of your parents/legal guardians earned a bachelor's (4 year) degree? Yes No

Previous Education

Name of public high school you are enrolled in to access Running Start _____

If home-schooled or private-schooled, please give the name of the public high school you would normally attend.

High School Code

Date you will graduate from your high school Month_____ Year_____

List all previous colleges in order of attendance. If you have attended more than one college, please attach the information on a separate sheet.

Institution: Name of other college(s), vocational/technical schools	City and State	
Dates Attended: Month/Year to Month/Year _____ / _____ to _____ / _____	Degree <input type="checkbox"/> Yes <input type="checkbox"/> No	College Code

Clark College has permission to request my high school transcript and send a grade report each quarter to my high school. I certify that, to the best of my knowledge, all statements on this form are true.

Applicant Signature _____ Today's Date _____

* Your Social Security number is confidential and, under federal law called the Family Education Rights and Privacy Act (FERPA), the college will protect it from unauthorized use and/or disclosure. In compliance with state/federal requirements, disclosures may be authorized for the purposes of state and federal financial aid, Hope/Lifetime Learning tax credits, academic transcripts, assessment or accountability research.

Clark College does not discriminate on the basis of race, color, national origin, sex, disability, age, religion, sexual orientation, gender identity, gender expression, political affiliation creed, disabled veteran status, marital status, honorably discharged veteran or Vietnam-era veteran status in its programs and activities.

For Office Use Only

Completely fill in boxes.

Required Information

Please indicate what race(s) you consider yourself to be:

- 800. White
- 611. Japanese
- 619. Vietnamese
- 605. Chinese
- 872. African American
- 653. Native Hawaiian
- 681. Pacific Islander
- 612. Korean
- 597. American Indian

(specify tribe/village or corporation)

- 015. Alaska Native
- 608. Filipino
- 621. Other Asian
- 799. Other Race

(please specify)

Are you of Spanish/Hispanic/Latino Ethnicity?

- No
- 722. Yes, Mexican, Mexican American, Chicano
- 727. Yes, Puerto Rican
- 709. Yes, Cuban
- Yes, Other Spanish/Hispanic/Latino

(please specify)