

CENTRAL TEXAS COLLEGE

Texas Registration Form

1. Legal Name: _____
(Last) (First) (MI) (Suffix)

2. Student ID _____ 3. Daytime Phone: (____) _____

Social Security Disclosure

Disclosure of your social security number (SSN) is requested from you in order for Central Texas College to identify your records. No statute or other authority requires that you disclose your SSN for that purpose. Failure to provide your SSN, however, may result in records being delayed or misplaced. Further disclosure of your SSN is governed by the applicable law.

4. Primary Email Address: _____

Change of Address: ☐ Yes ☐ No

Local/Mailing: ☐ Permanent: ☐

Street/PO BOX City County State Zip Code

5. **Residency:** I consider myself to be a resident of _____ State. (If Military, LES state of residence)

"I understand the requirements for classification as a resident of Texas for tuition purposes and I affirm by my signature below that I will notify the proper officials of this institution if circumstances change so as to disqualify me for this classification. I understand that violation of this oath of residency will result in disciplinary action."

Student Signature: _____ Date: _____
MM / DD / YY

STUDENT SCHEDULE

Student's Location: _____ Term: _____ Year: _____

Location Code	Course Synonym Number	Course			Class Date		# of Weeks	Credit Hours
		Name	Number	Section #	Start	End		

Advisor Signature: _____ Date: _____ Total Hours: _____
MM / DD / YY

Guidelines: As a Dual Credit/Early Admissions participant, I understand I must abide by all rules and regulations of CTC and my own school district. * *Note:* CTC assumes no responsibility for loss of Interscholastic League eligibility of high school students enrolled under this program. The high school determines whether CTC courses will be used for high school credit.

Acknowledgment: I have read and understand the eligibility requirements and guidelines for Dual Credit/Early Admissions Program. If at any time I do not meet the minimum requirements to be placed in a course, even if the course already started, I will be withdrawn from this course and placed in a different course, possibly not dual-credit, as selected by the HS counselor.

Student Signature _____ **Date** _____
As indicated by my signature, I authorize CTC to report information regarding my classes to officials at my high school.

Parent Signature _____ **Date** _____

High School Principal or Designee _____ **Date** _____

CTC Counselor/Site Representative _____ **Date** _____
As indicated by my signature, I confirm that the student meets the requirements to participate in the listed courses.

CTC President, Texas Operations and Online Programs _____ **Date** _____
(required for sophomores and 3-5 course approvals)

OFFICIAL USE ONLY

1: **CTC GPA** _____ **HS GPA:** _____

2: **SCORES needed to qualify students:**

Minimum Required Score	TSI Complete	ENGL 1301 & SPCH 1315 (score required)	MATH 1332 & 1342 (score required)	Math 1414, 1316, 1324, BIOL 1406 (score required)	GOVT, HIST, ECON & FOREIGN LANG (score required)	Student's Score
TSI Writing	363/4 or 5 only	363/4 or 5 only				
TSI Reading	351	351			351	
TSI Math	350		344	350		
TAKS ELA	2200/3	2200/3+			2200	
TAKS M	2200		2200	2200		
ACT R	COMP 23/19+	19+			COMP 23/19+	
ACT M	19		19+	19+		
SAT R	COMP 1070 / 500+	500+ (Critical Reading)			COMP 1070/ 500+	
SAT M	500		500+	500+		

Test scores for students who *registered prior to August 26, 2013*:

Name of Test	Writing/Reading	Math

3: **COURSE PRE-REQUISITES** (if applicable) – **Copy of unofficial college transcript required:**

Course Requested	Pre-requisite course completed	Name of College/University where completed	Grade



Dual Credit/Early Admissions Approval/Advising Plan

Printed Name: _____ SSN: _____ Grade Level: ☐ SO ☐ JR ☐ SR
School: _____ Semester: _____ Year: 20____

A. Please select all categories that apply:

- ☐ First-time Dual Credit Student (Student receiving both high school and college credit)
☐ Continuing Dual Credit
☐ Early Admissions (Student taking courses for college credit only)

HS Course Code/s:	CTC Course/s Equivalent:	Course Start Date
1.	1.	
2.	2.	
3.	3.	
4.	4.	
5.	5.	

B. Requirements to take up to 2 classes per semester:

1. Must be classified as a Sophomore, Junior, or Senior.
2. Must obtain approval from parent/guardian, high school counselor, and HS principal/designee before enrollment.
3. Meet TSI requirements and individual course pre-requisites relevant to the course(s) to be attempted in academic coursework or STAARS minimum high school passing standards on math and/or ELA test to enroll in career/technical education courses. The student must arrange for testing, if necessary.
4. Student must have a Dual Credit/Early Admission Application and submit a CTC application with an official transcript. This application must be completed and submitted to the counselor in a timely manner. College admission requirements are the responsibility of the student.
5. A new Dual Credit/Early Admissions Application is required each semester or to add courses not previously approved.
6. In addition, **sophomores** must have a 3.5 or higher high school GPA on a 4.0 scale, 4.375 or higher high school GPA on a 5.0 scale, or 5.25 or higher high school GPA on a 6.0 scale **and** receive course load approval of CTC President, Texas Operations & Online Programs.

C. Requirements to take more than 2 and no more than 4 classes per semester - juniors and seniors ONLY:

1. Must meet all of the above eligibility requirements and if:
 - a. First time dual credit student – Be commended on STAAR (ENGL III – 2000+) or TSI Assessment (Reading 356+ score, Writing 368/4 or 5 on the essay, SAT 1070 combined with Critical Reading 500/ACT 23 Composite with English 19).
 - b. Continuing dual credit student – CTC GPA of minimum 2.5.
2. Course load approval of CTC President, Texas Operations and Online Programs is required.
3. If at any time your CTC GPA falls below a 2.0, regardless if you meet the testing criteria, you will not be allowed to take more than 2 courses in one semester. If you do not improve your CTC GPA, you will be placed on suspension.

D. Requirement to take 5 classes per semester - juniors and seniors only: CTC GPA 3.0

Proceed to back



Application for Admission

CENTRAL TEXAS COLLEGE DISTRICT DOES NOT DISCRIMINATE IN ADMISSIONS OR ACCESS TO, OR TREATMENT OR EMPLOYMENT IN ITS PROGRAMS AND ACTIVITIES ON THE BASIS OF RACE, COLOR, RELIGION, NATIONAL ORIGIN, GENDER, DISABILITY, AGE OR VETERAN STATUS

Application must be printed in ink, please complete all questions.

BIOGRAPHICAL INFORMATION

Last Name		First Name		Middle Name		Suffix	
Social Security No. _____-_____-____			Gender <input type="radio"/> Male <input type="radio"/> Female		Date of Birth ____/____/____		
Other Names		First		Middle		Last	
1.							
2.							
3.							
Citizenship – Are you a U.S. Citizen? <input type="radio"/> Yes <input type="radio"/> No		Place of Birth: City		State		Country	
Please provide the following race/ethnic data. This information is requested on a voluntary basis by the U.S. Department of Education. (This information will not affect your admission to the college.) Check all that apply:							
Ethnicity: Are you Hispanic or Latino? (A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race) <input type="radio"/> Yes <input type="radio"/> No							
Race: Please select the racial category or categories with which you most closely identify. Check as many as apply. <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White							

CONTACT INFORMATION

Current Address (Where you physically reside)				Permanent Address (home of record)			
Street Address Line 1				Is your permanent address the same as your current physical address? <input type="radio"/> Yes <input type="radio"/> No (If no, complete Permanent Address below)			
Street Address Line 2				Street Address Line 1			
City		State		Zip Code		Street Address Line 2	
County		Country		City		State Zip Code	
How long have you lived at this address? _____ years _____ months				County Country			
Mailing Address (Where you wish to receive mail if different from above. If neither, complete Mailing Address)							
Is your mailing address the same as your current or permanent address, or neither? <input type="radio"/> Current Address <input type="radio"/> Permanent Address <input type="radio"/> Neither							
Street Address Line 1				Street Address Line 2			
City		State		Zip Code		Country	
Phone & Email							
Cell Phone (____)____-____		Residence Phone (____)____-____		Work Phone (____)____-____		DSN or International Phone ____-____-____	
Primary Email (Mandatory)				Secondary Email			
Emergency Contact Information							
First Name		Last Name		Relationship <input type="radio"/> Parent <input type="radio"/> Spouse <input type="radio"/> Sibling <input type="radio"/> Grandparent <input type="radio"/> Other			
Daytime Phone (____)____-____				Other Phone (____)____-____			

ADDITIONAL INFORMATION

Is English your native language? <input type="radio"/> Yes <input type="radio"/> No	Are you participating in your school's Fast Track 2 Central Texas College Program? <input type="radio"/> Yes <input type="radio"/> No
Indicate father or legal guardian's highest educational background level: <input type="radio"/> No high school <input type="radio"/> Some high school <input type="radio"/> High school diploma or GED <input type="radio"/> Some college <input type="radio"/> Associates Degree <input type="radio"/> Bachelor's Degree <input type="radio"/> Graduate/Professional Degree <input type="radio"/> Unknown	Indicate mother or legal guardian's highest educational background level: <input type="radio"/> No high school <input type="radio"/> Some high school <input type="radio"/> High school diploma or GED <input type="radio"/> Some college <input type="radio"/> Associates Degree <input type="radio"/> Bachelor's Degree <input type="radio"/> Graduate/Professional Degree <input type="radio"/> Unknown

CITIZENSHIP BACKGROUND

Country of Citizenship	Do you hold Permanent Residence status (valid I-551) for the U.S.? (attach copy) <input type="radio"/> Yes <input type="radio"/> No	Card Date mm / dd / yyyy
Alien Number A _____	If you are not a U.S. citizen or permanent resident, do you have an application for permanent residence (form I-485) pending with the U.S. Citizenship and Immigration Services (USCIS)? (attach copy) <input type="radio"/> Yes <input type="radio"/> No	

ENROLLMENT INFORMATION

Term Expected to Enter <input type="radio"/> Fall (Aug-Dec) <input type="radio"/> Spring (Jan-Apr) <input type="radio"/> Summer I (May) <input type="radio"/> Summer II (June-July) Year: _____	Basis of Admission <input type="radio"/> Course for College Credit <input type="radio"/> Non-Credit Course Work <input type="radio"/> API- Adult HS Diploma Program	Campus <input type="radio"/> Main Campus (Killeen) <input type="radio"/> Fort Hood Campus <input type="radio"/> Texas Service Areas <input type="radio"/> Continental U.S. <input type="radio"/> Europe <input type="radio"/> Pacific Far East <input type="radio"/> Navy <input type="radio"/> Other
Service Area/Location _____	To which location do you closely reside? <input type="radio"/> In Texas <input type="radio"/> Outside Texas	Method of Instruction <input type="radio"/> Online <input type="radio"/> Face to Face <input type="radio"/> Both (Online and Face to Face)
Select the option that is most appropriate for attending Central Texas College. <input type="radio"/> American Preparatory Institute <input type="radio"/> High School Dual Credit/Early Admission <input type="radio"/> General Educational Dev (GED) <input type="radio"/> High School Diploma <input type="radio"/> Individual Approval <input type="radio"/> International Student <input type="radio"/> No HSD/GED-Noncredit Use Only <input type="radio"/> Transfer Student <input type="radio"/> Transient Student	Education Level <input type="radio"/> Freshman, less than 30 semester hours <input type="radio"/> Sophomore, 30-72 semester hours <input type="radio"/> Associate Degree earned <input type="radio"/> Bachelor degree or above earned <input type="radio"/> Other, 73 or more semester hours, but no degree earned Program of Study	Educational Goal <input type="radio"/> Earned Associate Degree (2 years) <input type="radio"/> Earned Certificate of Completion (less than 2 years) <input type="radio"/> Earn College Transfer Credit <input type="radio"/> Earn Dual Credit or Early Admission Course Work <input type="radio"/> To Get A New or Better Job/Improve Job Skills <input type="radio"/> Personal Enrichment <input type="radio"/> Earn High School Diploma (API)/Transfer Credit

MILITARY INFORMATION

Military Information- Self		
Do you have military affiliation based on yourself? Select all that apply: <input type="radio"/> No Affiliation <input type="radio"/> Active Duty Service Member <input type="radio"/> Active Reserve <input type="radio"/> Reserve <input type="radio"/> Prior Military <input type="radio"/> Retired		
Branch of Service: <input type="radio"/> Army <input type="radio"/> Marine Corps <input type="radio"/> Navy <input type="radio"/> Air Force <input type="radio"/> Coast Guard <input type="radio"/> National Guard		
Military Pay Grade:	Military Installation -If Active Duty, Active Reserve, Reserve.	State:
If prior/retired military, please provide date of separation:		State of separation:

Military Information- Family Member		
Are you a family member of?		
<input type="radio"/> Current Military	<input type="radio"/> Prior Military	<input type="radio"/> Neither
Select which status applies to you:		
Spouse of: <input type="radio"/> Active Duty Member	<input type="radio"/> Active Reserve Member	<input type="radio"/> Retired Member
Child of: <input type="radio"/> Active Duty Member	<input type="radio"/> Active Reserve Member	<input type="radio"/> Retired Member
<input type="radio"/> Prior Military Member <input type="radio"/> Other		
Branch of Service:		
<input type="radio"/> Army	<input type="radio"/> Marine Corps	<input type="radio"/> Navy
<input type="radio"/> Air Force	<input type="radio"/> Coast Guard	<input type="radio"/> National Guard
Military Pay Grade:	Military Installation -If Active Duty, Active Reserve, Reserve.	State:
If prior/retired military, please provide date of separation:		State of separation:

EDUCATION

High School/GED				
What is your high school status?				
<input type="radio"/> High School graduate	<input type="radio"/> GED Completion	<input type="radio"/> Current High School Student	<input type="radio"/> Other	
Did you graduate or will you graduate from a Texas high school or complete a GED in Texas prior to the term for which you are applying?*				
<input type="radio"/> Yes	<input type="radio"/> No			
High School Education				
<input type="radio"/> High School in Texas	<input type="radio"/> Home School in Texas	<input type="radio"/> Home School Outside of Texas	<input type="radio"/> High School Outside of Texas	
<input type="radio"/> High School Online	<input type="radio"/> High School Foreign			
High School Name	City	State/Country		
Date graduated or expected to graduate?				
If you did not graduate, date completed GED:		In what state did you receive your GED?		
College/University Name	City	State/Country	Dates Attended (From/To) mm-yyyy / mm-yyyy	Degree Earned
Institution 1			____/____	<input type="radio"/> No Degree Earned <input type="radio"/> Associate Degree <input type="radio"/> Bachelor's Degree or Above
Institution 2			____/____	<input type="radio"/> No Degree Earned <input type="radio"/> Associate Degree <input type="radio"/> Bachelor's Degree or Above
Institution 3			____/____	<input type="radio"/> No Degree Earned <input type="radio"/> Associate Degree <input type="radio"/> Bachelor's Degree or Above
Institution 4			____/____	<input type="radio"/> No Degree Earned <input type="radio"/> Associate Degree <input type="radio"/> Bachelor's Degree or Above
Institution 5			____/____	<input type="radio"/> No Degree Earned <input type="radio"/> Associate Degree <input type="radio"/> Bachelor's Degree or Above
Are you currently on academic probation or suspension from your last college attended?				
<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> N/A (I have not attended a prior college or university.)		

RESIDENCY INFORMATION

During the 12 months prior to the term for which you are applying, did you attend a public college or university in Texas (excluding Central Texas College) in a fall or spring term? ☐ Yes ☐ No

If yes, complete the following section Residency- Prior Texas College.

If no, continue to Residency Claim.

RESIDENCY- PRIOR TEXAS COLLEGE

What Texas public institution did you last attend?
Institution Name

Term enrolled?
☐ Fall (Aug-Dec)
☐ Spring (Jan- Apr)

School Year

During your last semester at a Texas public institution, did you pay resident (in-state) or nonresident (out-of-state) tuition?
☐ Resident ☐ Nonresident (out-of-state) ☐ Unknown

If you paid in-state tuition at your last institution, was it because you were classified as a resident or because you were a nonresident who received a waiver?
☐ Resident ☐ Nonresident with a waiver ☐ Unknown

RESIDENCY CLAIM

When you begin the semester for which you are applying, will you have lived in Texas for the previous 12 months?
☐ Yes ☐ No

Did you live or will you have lived in TX the 36 months leading up to high school graduation or completion of the GED?
☐ Yes ☐ No

Are you a US Citizen or Permanent Resident?
☐ Yes ☐ No

Did you graduate or will you graduate from a Texas high school or complete a GED in Texas prior to the term for which you are applying?
☐ Yes ☐ No

If you answered yes to all four questions above, continue to Certification of Residency to sign and date.

If you answered no to any of the four questions above, continue to Residency-Basis of Claim.

RESIDENCY- BASIS OF CLAIM

Of what country or U.S. state are you a resident?

If you are a US resident, do you file your own federal income tax as an independent tax payer?
☐ Yes ☐ No

If you are a US resident, are you claimed as a dependent or are you eligible to be claimed as a dependent by a parent or court-appointed legal guardian?
☐ Yes ☐ No

Who provides the majority of your support?
☐ Self ☐ Parent or legal guardian ☐ Other

If other, provide their relationship to you and an explanation:

If selected 'Self' continue on to Residency Based on Self.

If selected 'Parent or legal guardian' or 'Other' continue to Residency Based on Parent or Legal Guardian.

RESIDENCY BASED ON SELFAre you a foreign national here with a visa? ☐ Yes ☐ No

If yes, provide your visa type: _____

Are you a foreign national here with a Refugee, Asylee, Parolee or here under Temporary Protective Status? ☐ Yes ☐ NoIf yes, indicate your status: ☐ Refugee ☐ Asylee ☐ Parolee ☐ Temporary Protective Status ☐ None

Do you currently live in Texas?

☐ Yes ☐ No

If you currently live in Texas, how long have you been living here?

☐ 0-11 months
☐ 12-15 months
☐ 16 months or more

What is your purpose for being in the state?

☐ Go to college ☐ Establish/maintain a home ☐ Work assignment
☐ Other

If other, provide explanation:

If you are out of the state due to a temporary assignment by your employer or another temporary purpose, provide an explanation:

If you are a member of U.S. military, is Texas your Home of Record?

☐ Yes ☐ No

Do you hold a title to residential real property in Texas?

☐ Yes ☐ No

If yes, date acquired:

What state is listed as your military legal residence for tax purposes on your Leave and Earnings Statement for the 12 months prior to enrollment?

Do you have ownership interest and customarily manage a business in Texas without the intention of liquidation in the foreseeable future?

☐ Yes ☐ No

If yes, date acquired:

While living in Texas, have you been gainfully employed for a period of at least 12 consecutive months?

☐ Yes ☐ NoWhile living in Texas, have you received primary support through services from a social service agency for a period of at least 12 consecutive months? ☐ Yes ☐ No

If married, check all that apply:

- ☐ Spouse holds title to residential real property in Texas.
- ☐ Spouse has ownership interest and customarily manage a business in Texas without intention of liquidation in the foreseeable future.
- ☐ Spouse has been gainfully employed for 12 consecutive months in Texas.
- ☐ Spouse received primary support through services from a social service agency for 12 consecutive months.

How long have you been married to the Texas resident prior to enrollment?

☐ 0-11 months
☐ 12 months
☐ 13 months or more

RESIDENCY BASED ON PARENT OR LEGAL GUARDIAN

Is the parent or legal guardian upon whom you base your claim of residency a U.S. citizen?

☐ Yes☐ No

Is the parent or legal guardian upon whom you based your claim of residency a Permanent Resident?

☐ Yes☐ No

Is this parent or legal guardian a foreign national whose application for Permanent Resident Status has been preliminarily reviewed?

☐ Yes☐ No

Is this parent or legal guardian a foreign national here with a visa?

☐ Yes☐ No

If so, provide visa type: _____

Is this parent or legal guardian a foreign national here with a Refugee, Asylee, Parolee or here under Temporary Protective Status?

☐ Yes☐ NoIf so, indicate which: ☐ Refugee☐ Asylee☐ Parolee☐ Temporary Protective Status☐ None

Does this parent or legal guardian currently live in Texas?

☐ Yes☐ NoIf he or she is out of the state due to a temporary assignment by his or her employer or another temporary purpose, provide an explanation.

If he or she is currently living in Texas, how long has he or she been living here?

☐ 0-11 months☐ 12-15 months☐ 16 months or more

What is your purpose for being in the state?

☐ Go to college☐ Establish/maintain a home☐ Work assignment☐ Other

If other, provide explanation: _____

If he or she is a member of U.S. military, is Texas his or her Home of Record?

☐ Yes☐ No

What state is listed as his or her military legal residence for tax purposes on his or her Leave and Earnings Statement for the 12 months prior to enrollment?

Does your parent or legal guardian hold a title to residential real property in Texas?

☐ Yes☐ No

If yes, date acquired: _____

Do they have ownership interest and customarily manage a business in Texas without the intention of liquidation in the foreseeable future?

☐ Yes☐ No

If yes, date acquired: _____

While living in Texas, has your parent or legal guardian been gainfully employed for a period of at least 12 consecutive months?

☐ Yes☐ No

While living in Texas, has your parent or legal guardian received primary support through services from a social service agency for a period of at least 12 consecutive months?

☐ Yes☐ No

If parent or legal guardian is married, check all that apply:

☐ Spouse holds title to residential real property in Texas.☐ Spouse has ownership interest and customarily manage a business in Texas without intention of liquidation in the foreseeable future.☐ Spouse has been gainfully employed for 12 consecutive months in Texas.☐ Spouse received primary support through services from a social service agency for 12 consecutive months.

How long has your parent or legal guardian been married to the Texas resident prior to enrollment?

☐ 0-11 months☐ 12 months☐ 13 months or more**RESIDENCY ADDITIONAL INFORMATION (Optional)**

Please provide additional information that Central Texas College may need in order to determine your residency for tuition purposes. (Optional)

CERTIFICATION OF RESIDENCY. All Students Must Complete This Section

I understand that officials of my college/university will use the information submitted on this form to determine my status for residency eligibility. I authorize the college/university to verify the information I have provided. I agree to notify the proper officials of the institution of any changes in the information provided. I certify that that information on this application is complete and correct and I understand that the submission of false information is ground for rejection of my application, withdrawal of any offer of acceptance, cancellation of enrollment and/or appropriate disciplinary action.

Upon application submission, residency is determined using the rules set out in the Texas Administrative Code Title 19, Part 1, Chapter 21, Subchapter B. The residency determinations are Texas resident (T), Non-Texas resident (N), or Unable to Determine (U). Exception codes are provided for applications with Unable to Determine status, and may be provided for applicants with Texas resident status, if the applicant needs to provide more information or verification of status. It is recommended that institutions verify this information.

Signature: _____

Date: _____

IMPORTANT INFORMATION FOR STUDENTS WHO DROP OR WITHDRAW FROM COURSES

Under Section 51.907 of the Texas Education Code, "an institution of higher education may not permit a student to drop more than six courses, including any course a transfer student has dropped at another institution of higher education." This statute was enacted by the State of Texas in Spring 2007 and applies to students who enroll in a public institution of higher education as first-time freshmen in Fall 2007 or later. Any course that a student drops is counted toward the six course limit if "(1) the student was able to drop the course without receiving a grade or incurring an academic penalty; (2) the student's transcript indicates or will indicate that the student was enrolled in the course; and (3) the student is not dropping the course in order to withdraw from the institution."

CERTIFICATION OF INFORMATION. All Students Must Complete This Section.

☐ Notification of Rights under the Family Educational Rights and Privacy Act (FERPA): Information collected about you through this application may be held by any institution of higher education to which you apply. With few exceptions, you are entitled on your request to be informed about the collected information. Under Sections 552.021 and 552.023 of the Texas Government Code, you are entitled to receive and review the information. Under Section 559.004 of the Texas Government Code, you are entitled to correct information held by an institution that is incorrect. You may correct information held by any institution to which you apply by contacting your institution. The information that is collected about you will be retained and maintained as required by Texas records retention laws (Section 441.180 et seq. of the Texas Government Code) and rules. Different types of information are kept for different periods of time.

☐ If my application is accepted, I agree to abide by the policies, rule and regulations at any college to which I am admitted. I certify that the information on this application is complete and correct and I understand that the submission of false information is grounds for rejection of my application, withdrawal of any offer of acceptance, cancellation of enrollment and/or appropriate disciplinary action. I understand that officials of my college will use the information submitted on this form to determine my status for residency eligibility. I authorize the college to verify the information I have provided. I also authorize the college to electronically access my records regarding the Texas Success Initiative. I agree to notify the proper officials of the institution of any changes in the information provided.

☐ CTC will charge the nonresident rate for any course attempted more than two times that cannot be submitted for formula funding. I certify that I have read and understand the college's Third Enrollment Attempt Policy.

☐ Students enrolling in CTC Texas locations and in-state distance learners, as well as those living outside of the state but paying Texas tuition rates are liable for meeting the Texas Success Initiative. Students may be exempt or waived from meeting TSI or may be required to take a placement test in order to meet compliance for TSI. A student's admittance is not conditional on the student's scores. CTC is an open admissions institution. I certify that I have read and understand the TSI requirement.

☐ I certify that I have read and understand the [New Requirements and Information about Bacterial Meningitis](#).

☐ I understand that I must opt out if I do not want CTC to request a college or military transcript on my behalf.

Signature: _____

Date: _____

(mm/dd/yyyy)

Financial Aid Information

You must apply for financial aid separately. You can apply online at www.fafsa.ed.gov. Contact the Institution's financial aid office directly for more information.

Non-Discrimination Clause

Admission to any of the Texas institutions of higher education and any of their sponsored programs is open to qualified individuals regardless of race, color, gender, religion, age, national origin, disability or veteran status.

Social Security Disclosure

Regulations governing the Federal student financial aid programs require schools to collect and confirm students' official social security numbers; and the Taxpayer Relief Act of 1997 compels postsecondary institutions to collect and use students' social security numbers to report tuition payments to the Internal Revenue Service each year. Your correct social security number is required to receive federal financial aid disbursements and an end-of-year 1098-T tax form for reporting tuition payments. If CTC does not receive or cannot confirm your social security number, CTC will not be able to provide these services to you. Although providing your social security number is not required for admission to the college, it is important for purposes of matching the identity of your application, grade transcript, test scores, and other related enrollment documents.

CENTRAL TEXAS COLLEGE

Dual Credit/Early Admissions

Authorization for Release of Information

Last Name (Student's)	First Name	Student ID Number
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I authorize the _____ Independent School District to release all information necessary, including, but not limited to, high school transcript, financial aid information, test scores, and academic records to **Central Texas College (CTC)**. This information will be provided only to CTC and may not be released to any other organization or person without my written approval.

I authorize **Central Texas College** to release all information necessary, including, but not limited to, college transcript, financial aid information, test scores, and academic records to _____ Independent School District. This information will be provided only to my school district and may not be released to any other organization or person without my written approval.

I understand that my records are protected by the *Family Educational Rights and Privacy Act of 1974* as amended (FERPA) and that these records will be kept strictly confidential by all parties to whom access is granted. I understand that this requested information is to be used by CTC for student follow up and institutional research purposes.

I understand that this authorization will remain in effect until I revoke it in writing.

Signature of Student	Date
----------------------	------

Signature of Parent or Guardian, if necessary	Date
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* Complete the form with the proper signatures. Return this form to your high school Guidance and Counseling Office or directly to Central Texas College, ATTN: Systems Registrar, P. O. Box 1800, Killeen, TX 76540, (254) 526-1663 with the proper signatures.