



Wharton County Junior College

Application for Admission
 Wharton County Junior College
 911 Boling Highway
 Wharton TX 77488 (979) 532-6303

Office Use Only:
 Residency Status

Code _____ Initials _____

Social Security Number	Last Name	First Name
Middle Name	Suffix (Jr, III, etc)	Preferred Name (if different from first name):
Other Names Used		

Mailing Address:	Street:	Zipcode:	Home Phone:
	City:	State:	Cell Number:
Permanent Address: If Different	Street:	Zipcode:	Work Number:
	City:	State:	

E-Mail Address:	Additional Phone:	Sex: M <input type="checkbox"/> F <input type="checkbox"/>
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Date of Birth _____ - _____ - _____ Month Day Year	In what county do you live? _____
Ethnic Origin (Optional)	How long? Less than 6 months _____ 6 months or more but less than 1 year _____ 1 year or more _____
1. _____ White-Non Hispanic Origin	In what public school district do you live? _____
2. _____ Black-Non Hispanic Origin	How long? Less than 6 months _____ 6 months or more but less than 1 year _____ 1 year or more _____
3. _____ Hispanic	Major: (See 2nd page for major code) _____
4. _____ Asian or Pacific Islander	High school graduation date: _____ - _____ - _____
5. _____ Native American Indian	Month Day Year
6. _____ Non-resident/Foreign National	Name of High School _____ City _____ State _____

Expected enrollment term: Fall 20____. Spring 20____. Summer-1 20____. Summer-2 20____.

I am seeking admission to WCJC as: (select only one):	My primary reason for attending college is (select only one):
1. _____ High School Graduate	1. _____ Personal Enrichment
2. _____ GED – Date Received _____	2. _____ Earn one-year certificate
3. _____ College Transfer (Previously enrolled at another college)	3. _____ Earn two-year degree
4. _____ Returning WCJC student	4. _____ Prepare to transfer to four-year university
5. _____ Transient Student (Summer Classes Only)	5. _____ Undetermined
6. _____ College graduate with Associate Degree	6. _____ Get a job
7. _____ College graduate with Bachelor's Degree	7. _____ Improve job skills
8. _____ College graduate with Master's Degree	8. _____ Get a better job
	9. _____ Maintain licensure
	10. _____ Prepare to transfer to UH-Victoria

I have taken the THEA _____ ACT _____ SAT _____ Asset _____ Compass _____ Accuplacer _____ TASP _____

List all colleges previously attended:

Name of College	Location (City and State)	First Term	Last Term	Hrs Earned

Are you on probation from the last college attended? Yes _____ No _____ Are you on suspension? Yes _____ No _____

The application fee is \$10. Make your check payable to WCJC. Please include your social security number on the check.



Associate of Applied Science (AAS)

The AAS programs provide the education and training for immediate employment.

Associate of Arts (AA)

The AA programs provide the first two years of a four-year program of study.

Program -Major	Associate of Applied Science (AAS)	Program -Major	Associate of Arts (AA) These are the transfer programs.
AAS-AUTA	Automotive Technology	AA-AGRI	Agriculture
AAS-COS	Cosmetology	AA-ART	Art
AAS-DH	Dental Hygiene	AA-BIOL	Biology
AAS-DRAF	Engineering Design	AA-BUSI	Business Administration
AAS-CDEV	Early Childhood Development	AA-CHEM	Chemistry
AAS-ELET	Electronics Technology	AA-COMP	Computer Science
AAS-EMT	Emergency Medical Technician	AA-CJ	Criminal Justice (transfer 4-yr plan)
AAS-HITT	Health Information Technology	AA-DRAM	Drama
AAS-HS	Human Services	AA-ECON	Economics
AAS-LE	Law Enforcement	AA-ENGR	Engineering
AAS-LEGA	Paralegal Studies	AA-ENGL	English
AAS-ITCP	Computer Programming	AA-GEN	General Studies (Liberal Arts)
AAS-ITNA	Network Administrator	AA-GEOG	Geography (Social Science)
AAS-NURS	Nursing (ADN)	AA-GOVT	Government (Social Science)
AAS-OADM	Office Administration	AA-HIST	History (Social Science)
AAS-PTA	Physical Therapist Assistant	AA-KINE	Kinesiology
AAS-PTEC	Process Technology	AA-MATH	Mathematics
AAS-RADT	Radiologic Technology	AA-MUSI	Music
AAS-V2RN	LVN-ADN Transition Program	AA-NUR4	Nursing (4-yr deg plan for transfer)
	Associate of Arts in Teaching (AAT)	AA-PHYS	Physics
AAT-AATA	EC-4 Early Childhood Specialization	AA-PSYC	Psychology (Behavioral Science)
AAT-AATB	EC-12 Generalist	AA-SOCI	Sociology (Behavioral Science)
AAT-AATC	EC-12 Content Majors	AA-SPCH	Speech

One-Year Certificate Programs

Program -Major	One-Year Certificate Programs	Program -Major	One-Year Certificate Programs (continued)
CER-ADC1	Administrative Assistant	CER-FIRE	Fire Academy
CER-ARCH	Architectural Design	CER-HART	Heating, Air Conditioning Technology
CER-AUTC	Automotive Technology	CER-HS	Human Services
CER-CISC	Cisco Router Networking	CER-ITC2	PC Technical Support
CER-CAD	Computer Aided Drafting (CAD)	CER-BPOC	Police Academy
CER-COSM	Cosmetology	CER-SURG	Surgical Technology
CER-CDC3	Early Childhood Admin Certificate	CER-LVN	Vocational Nursing (LVN)
CER-CDC1	Early Childhood Technical Certificate		
CER-EMS	Emergency Medical Services Cert		

Residency Information

Texas Higher Education Coordinating Board rule 21.731 requires each student applying to enroll at an institution to respond to a set of core residency questions for the purpose of determining the student’s eligibility for classification as a resident.

Part A. Student Basic Information. All Students must complete this section.

Name _____ Soc.Sec.Number _____

Part B. Previous Enrollment. <u>For all students.</u>		
1. During the 12 months prior to the term for which you are applying, did you attend a public college or university in Texas in a fall or spring term? If you answered “No”, please continue to Part C . If you answered “Yes”, complete questions 2 – 5:	Yes_____	No_____
2. What Texas public institution did you last attend? (Give full name, not just initials.)		
3. In which terms were you last enrolled? (enter year for all that apply)	Fall_____ (enter year)	Spring_____ (enter year)
4. During your last semester at a Texas public college or university, did you pay resident (in-state) or nonresident (out-of-state) tuition? Unknown_____	Resident (in-state)_____	Nonresident (out-of-state)_____
5. 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? Unknown_____	Resident_____	Nonresident with a waiver_____

IMPORTANT: If you were enrolled at a Texas **public** college or university during a fall or spring semester within the previous 12 months and were classified as a Texas resident, skip to **Part J**, sign and date this form and submit it to the WCJC Office of Admissions & Registration. Otherwise, please proceed to **Part C**.

Part C. Residency Claim.		
Are you a resident of Texas?	Yes_____	No_____
If you answered “Yes”, continue to Part D . If you answered “No”, complete the following question and continue to Part J . Of what state or country are you a resident? _____ If you are uncertain, continue to Part D .		

Part D. Acquisition of High School Diploma or GED.		
1a. Did you graduate from high school or complete a GED in Texas? 1b. If you graduated from high school what was the name of the high school? _____ In what city is it located? _____	Yes_____	No_____
2. Did you live in Texas the 36 months leading up to high school graduation or completion of the GED?	Yes_____	No_____
3. When you begin the semester for which you are applying, will you have lived in Texas for the previous 12 months?	Yes_____	No_____
4. Are you a U.S. Citizen or Permanent Resident?	Yes_____	No_____
<i>Instructions to Part D:</i> If you answered “No” to question 1a or 2 or 3, continue to Part E . If you answered “Yes” to all four questions, skip to Part J . If you answered “yes” to questions 1, 2 and 3, but “no” to question 4, Complete a copy of the Affidavit provided as an Attachment to this form, Skip to Part J of this form, and submit both this form and the affidavit to the WCJC Office of Admissions & Registration.		

Part E. Basis of Claim to Residency. To be completed by everyone who did <u>not</u> answer “Yes” to questions 1a, 2, and 3 of Part D.		
1. Do you file your own federal income tax as an independent tax payer?	Yes_____	No_____
2. Are you claimed as a dependent or are you eligible to be claimed as a dependent by a parent or court-appointed legal guardian? (To be eligible to be claimed as a dependent, your parent or legal guardian must provide at least one half of your support. A step-parent does not qualify as a parent if he/she has not adopted the student.)	Yes_____	No_____
3. If you answered “No” to both questions above, who provides the majority of your support? Other: (list)_____	Self_____	Parent or guardian_____
<i>Instructions to Part E:</i> If you answered “Yes” to question 1, continue to Part F . If you answered “Yes” to question 2, skip to Part G . If you answered “No” to 1 and 2 and “self” to question 3, continue to Part F . If you answered “No” to 1 and 2 and “parent or guardian” to question 3, skip to Part G . If you answered “No” to 1 and 2 and “other” to question 3, skip to Part H and provide an Explanation, and complete Part J .		

Part F. Questions for students who answered “Yes” to Question 1 or “Self” to Question 3 of Part E.		
1. Are you a U.S. Citizen?	Yes_____	No_____
2. Are you a Permanent Resident of the U.S.?	Yes_____	No_____
3. Are you a foreign national whose application for Permanent Resident Status has been preliminarily reviewed? (You should have received a fee/filing receipt or Notice of Action (I-797) from USCIS showing your I-485 has been reviewed and has not been rejected).	Yes_____	No_____
4. Are you a foreign national here with a visa or are you a Refugee, Asylee, Parolee or here under Temporary Protective Status? If so, indicate which. Visa_____ Refugee_____ Asylee_____ Parolee_____ Temporary Protective Status_____		
5. Do you currently live in Texas? If you are out of state due to a temporary assignment by your employer or other temporary purpose, please explain in Part H .	Yes_____	No_____
6a. If you currently live in Texas, how long have you been living here? 6b. What is your main purpose for being in the state? If for reasons other than those listed, give an explanation in Part H. Go to College_____ Establish/maintain a home_____ Work assignment_____	Years_____	Months_____
7. If you are a member of the U.S. military, is Texas your Home of Record? What state is listed as your military legal residence for tax purposes on your Leave and Earnings Statement?	Yes_____	No_____
8. Do any of the following apply to you? (Check all that apply) a. Hold the title to real property (home, land) in Texas? If “Yes”, date acquired:_____	Yes_____	No_____
b. Own a business in Texas? If “Yes”, date acquired:_____	Yes_____	No_____
c. Hold a state or local license to conduct a business or practice a profession in Texas? If “Yes”, date acquired:_____	Yes_____	No_____
9. For the past 12 months, have you: (Check all that apply) a. been gainfully employed in Texas? b. received services from a social service agency that provides services to homeless persons?	Yes_____	No_____
10a. Are you married to a person who could answer “Yes” to any part of question 8 or 9? 10b. If yes, indicate which question could be answered yes by your spouse. (Answers can be in the format: 8b, 9a, etc.)	Yes_____	No_____
10c. How long have you been married to the Texas resident? Skip Part G and continue to Part H .	Years_____	Months_____

Part G. Questions for students who answered “Parent” or “Legal Guardian” to Question 3 of Part E.		
1. Is the parent or legal guardian upon whom you base your claim of residency a U.S. Citizen?	Yes_____	No_____
2. Is the parent or legal guardian upon whom you base your claim of residency a Permanent Resident?	Yes_____	No_____
3. Is this parent or legal guardian a foreign national whose application for Permanent Resident Status has been preliminarily reviewed? (He or she should have received a fee/filing receipt or Notice of Action (I-797) from the USCIS showing his or her I-485 has been reviewed and has not been rejected.)	Yes_____	No_____
4. Is this parent or legal guardian a foreign national here with a visa or are you a Refugee, Asylee, Parolee or here under Temporary Protective Status? If so, indicate which. Visa_____ Refugee_____ Asylee_____ Parolee_____ Temporary Protective Status_____		
5. Does this parent or legal guardian currently live in Texas? If he or she is out of state due to a temporary assignment by his/her employer or other temporary purpose, please explain in Part H .	Yes_____	No_____
6a. If he or she is currently live in Texas, how long has he or she been living here? 6b. What is your parent’s or legal guardian’s main purpose for being in the state? If for reasons other than those listed, give an explanation in Part H . Go to College_____ Establish/maintain a home_____ Work assignment_____	Years_____	Months_____ –
7. If he or she is a member of the U.S. military, is Texas his or her Home of Record? What state is listed as his or her military legal residence for tax purposes on his or her Leave and Earnings Statement?	Yes_____	No_____
8. Do any of the following apply to your parent or guardian? (Check all that apply) a. Holds the title to real property (home, land) in Texas? If “Yes”, date acquired:_____	Yes_____	No_____
b. Owns a business in Texas? If “Yes”, date acquired:_____	Yes_____	No_____
c. Holds a state or local license to conduct a business or practice a profession in Texas? If “Yes”, date acquired:_____	Yes_____	No_____
9. For the past 12 months, has your parent or guardian: (Check all that apply) a. been gainfully employed in Texas? c. received services from a social service agency that provides services to homeless persons?	Yes_____	No_____
10a. Is your parent or legal guardian married to a person who could answer “Yes” to any part of question 8 or 9? 10b. If yes, indicate which question could be answered yes by your parent or guardian’s spouse. (Answers can be in the format: 8b, 9a, etc.) Answers → 10c. How long has your parent or guardian been married to the Texas resident? Continue to Part H .	Yes_____	No_____

Part H. General Comments. Is there any additional information that you believe WCJC should know in evaluating your eligibility to be classified as a resident? If so, please provide it below:

Part J. Certification of Residency. All students must complete this section.

I understand that officials of Wharton County Junior 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 agree to notify the proper officials of the institution of any changes in the information provided. 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 acknowledge that I have received from WCJC safety information concerning bacterial meningitis.

Signature: _____ **Date:** _____

New students should submit:

1. A completed WCJC Application for Admission.
2. A high school transcript showing date of graduation.
3. Transfer students must also submit official college transcripts.
4. THEA scores (or proof of THEA exemption).
5. A proof of residence document. Usually, the Residency Information portion of this application form will suffice.
6. A \$10 non-refundable application processing fee (payable to WCJC).

These application materials should be submitted as early as possible to:

REGISTRAR'S OFFICE
WHARTON COUNTY JUNIOR COLLEGE
911 BOLING HIGHWAY
WHARTON TX 77488

Wharton County Junior College does not discriminate on the basis of race, color, age, marital status, national origin, religion, sex, or disability.

This form applies only if in Part D you answered “yes” to questions 1a, 2 and 3, but “no” to question 4.

AFFIDAVIT

STATE OF TEXAS

COUNTY OF _____

Before me, the undersigned Notary Public, on this day personally appeared,

Known to me, who being by me duly sworn upon his/her oath, deposed and said:

1. My name is _____. I am _____ years of age and have personal knowledge of the facts stated herein and they are all true and correct.
2. I graduated or will graduate from a Texas high school or received my GED certificate in Texas.
3. I resided in Texas for three years leading up to graduation from high school or receiving my GED certificate.
4. I have resided or will have resided in Texas for the 12 months prior to the census date of the semester in which I will enroll in Wharton County Junior College.
5. I have filed or will file an application to become a permanent resident at the earliest opportunity that I am eligible to do so.

In witness whereof, this _____ day of _____, _____.

(Signature)

(Printed Name)

(Student I.D.#)

SUBSCRIBED TO AND SWORN TO BEFORE ME, on the _____ day of

_____, _____, to certify
Which witness my hand and official seal.

Notary Public in and for the State of Texas

IMPORTANT INFORMATION ABOUT BACTERIAL MENINGITIS

STUDENT INFORMATION – RETAIN FOR FUTURE REFERENCE

This information is being provided to all new college students in the state of Texas. Bacterial Meningitis is a serious, potentially deadly disease that can progress extremely fast – so take utmost caution. It is an inflammation of the membranes that surround the brain and spinal cord. The bacteria that causes meningitis can also infect the blood. This disease strikes about 3,000 Americans each year, including 100 – 125 on college campuses, leading to 5 – 15 deaths among college students every year. There is a treatment, but those who survive may develop severe health problems and disabilities.

WHAT ARE THE SYMPTOMS?

High fever	Severe headache	Rash or purple patches on skin	Vomiting
Light sensitivity	Stiff neck	Confusion and sleepiness	Nausea
Lethargy	Seizures		

There may be a rash of tiny, red-purple spots caused by bleeding under the skin. These can occur anywhere on the body.

The more symptoms, the higher the risk, so when these symptoms appear seek immediate medical attention.

HOW IS BACTERIAL MENINGITIS DIAGNOSED?

Diagnosis is made by a medical provider and is usually based on a combination of clinical symptoms and laboratory results from spinal fluid and blood test. Early diagnosis and treatment can greatly improve the likelihood of recovery.

HOW IS THE DISEASE TRANSMITTED?

The disease is transmitted when people exchange saliva (such as by kissing, or sharing drinking containers, utensils, cigarettes, toothbrushes, etc.) or come in contact with respiratory or throat secretions.

HOW DO YOU INCREASE YOUR RISK OF GETTING BACTERIAL MENINGITIS?

Exposure to saliva by sharing cigarettes, water bottles, eating utensils, food, kissing, etc. Living in close conditions (such as sharing a room/suite in a dorm or group home).

WHAT ARE THE POSSIBLE CONSEQUENCES OF THE DISEASE?

Death (in 8 to 24 hours from perfectly well to dead)	Permanent brain damage
Kidney failure	Learning disability
Hear loss, blindness	Limb damage (fingers, toes, arms, legs) that requires amputation
Gangrene	Coma
Convulsions.	

CAN THE DISEASE BE TREATED?

Antibiotic treatment, if received early, can save lives and chances of recovery are increased. However, permanent disability or death can still occur. Vaccinations are available and should be considered for:

Those living in close quarters

College students 25 years old or younger

Vaccinations are effective against 4 of the 5 most common bacterial types that cause 70% of the disease in the U.S. (but does not protect against all types of meningitis).

Vaccinations take 7-10 days to become effective, with protection lasting 3-5 years.

The cost of vaccine varies, so check with your health care provider.

Vaccination is very safe – most common side effects are redness and minor pain at injection site for up to two days.

HOW CAN I FIND OUT MORE INFORMATION?

Contact your own health care provider.

Contact your local or regional Texas Department of Health Office.

Contact web site: www.cdc.gov/ncidod/dbmd/diseaseinfo or www.acha.org