

Workforce Training/Firefighters Application for Admission/Registration

If you are currently enrolled at a KCTCS college or if you have completed THIS form in another workforce training course, you will need to check this box (Readmit), and complete: Name, Social Security Number, and Address.

Name _____
First Middle Last Preferred Name

Address _____
City County State Zip Code

Employer _____

List any phone number where we may contact you: _____ Cell Home Business

Email Address _____

Social Security Number _____ Date of Birth _____ *Gender: Male Female
Month Day Year

Citizenship Status US Citizen Yes No

If not a US citizen are you a permanent resident alien of the US? Yes No Resident Alien Number _____

*Primary Race/Ethnicity American Indian/Alaskan Native Asian Black/African-American
 Hispanic/Latino Not Specified Native Hawaiian/Other Pacific Islander White

* Optional information requested for reporting purposes and will not be used in an admission decision.

Please list all the names that you have used on previous educational records. _____

Admit Status

First-Time College Student Readmit (attended KCTCS previously)
 High School (taking college courses prior to High School graduation) First-Time Transfer (Are you eligible to return to your former college?) Yes No
 Visiting Student

High School Attended _____
(If you earned a GED enter GED for High School.) High School Name City State/County

High School Graduation Date _____ or GED Completion Date _____

Other postsecondary institutions attended and dates: (An official transcript from each institution listed is required for admission.)

College City State Dates Attended

Residency Status Kentucky Have you lived in Kentucky for the last 12 months? Yes No
 Non-Kentucky How long have you been living in your non-Kentucky county? _____

Firefighter Students Only

County Name _____ County Number _____
Fire Department # _____ Firefighter# _____
Fire Department Name _____ KCTCS Home College _____

College Use Only: Home College Code _____ Empl ID _____

Academic Plan Workforce Non-Degree 9002000000 Fire SciTech 4302037019 Other

Course Number _____ Course Title/Topic _____

Peoplesoft Class Number _____ Fee _____ Start/End Dates _____

Starting Term Summer Fall Spring _____ Year

Date _____ Signature _____

KCTCS is an equal opportunity employer and education institution.

Revised July 2008

