

APPLICATION FOR ADMISSION

Quinsigamond Community College

A community of support. A world of possibilities.

PERSONAL INFORMATION: PLEASE PRINT

Last Name

Middle Name

Date of Birth
(month/day/year)

Social Security Number

First Name

Maiden Name

Sex: Please check (✓) Male Female

RESIDENT ADDRESS

(Box, Apt., or Street Name and Number)

(City)

(State)

(Zip Code)

Home Phone

(Area Code)

Work Phone

(Area Code)

Cell Phone

(Area Code)

E-MAIL ADDRESS

PLEASE CHECK WHICH SEMESTER YOU WISH TO ENTER

Fall (Sept.-Dec.) 20____ Spring (Jan.-May) 20____ Summer (May-Aug.) 20____

■ Have you previously applied to Quinsigamond Community College? Please check (✓) Yes No

If yes, please indicate for which semester and year _____

■ Have you previously attended classes at Quinsigamond Community College? Please check (✓) Yes No

If yes, please indicate in which semester and year _____

If yes, what name did you use during that enrollment? _____

■ Please indicate the Study Option you are applying to: _____

Please write out Study Option above and print the code in boxes at right. See Study Options sheet on back cover for code.

■ Will you be attending full-time or part-time? Please check (✓) Part-time Full-time

■ What is the highest diploma, degree, or certificate you have achieved? Please check (✓) only one of the following:

High School Diploma General Educational Development G.E.D. No H.S. Diploma or G.E.D.

Certificate Associate's Degree Bachelor's Degree Graduate Degree

■ Are you interested in receiving information about Financial Aid? Please check (✓) Yes No

■ Are you interested in receiving information about disability services? Please check (✓) Yes No

■ Are you interested in playing intercollegiate sports? Please check (✓)

Women's Basketball Men's Basketball Baseball Softball

■ Are you a Veteran of the U.S. Armed Forces? Please check (✓) Yes No

GENERAL INFORMATION

What is your educational goal at Quinsigamond Community College? please check (✓)

Receive an Associate Degree or Certificate in the program to which you applied.

Take courses to qualify for another QCC Program of Study: indicate desired program _____

Take courses for personal or career enrichment.

Transfer courses to another institution, without receiving a degree.

OPTIONAL INFORMATION

The following information, which is voluntary, will help us to better know our student body and enable us to comply with governmental statistical requests. Responses will not be a factor in admissions decisions made by the college, but will be made a part of the Permanent Student File, which is protected by Federal and State Privacy Legislation.

- Marital Status: Please check (✓) only one of the following
 Single Married Widowed Separated Divorced
- Ethnic Background: Please check (✓) only one of the following
 American Indian/Alaskan Native Asian/Pacific Islander Hispanic Black/Non-Hispanic
 Cape Verdean White/Non-Hispanic Non-Resident Alien Other _____
- Please indicate the primary language spoken in your home: _____

ACADEMIC INFORMATION

High School (from which you will have graduated)

Name _____ City _____ State _____
CEEB # (H.S. Code number if known) Year of Graduation (actual or anticipated) _____

College

Name _____ City _____ State _____
CEEB # (College Code number if known) Dates Attended: from _____ to _____

College

Name _____ City _____ State _____
CEEB # (College Code number) Dates Attended: from _____ to _____

- Have you participated in a Tech Prep/Pathways Program in your high school? Yes No
- How did you first become aware of the programs offered at Quinsigamond Community College? Please check (✓)
 High School Counselor High School Teacher Community Agency Radio
 Web Page College Fair College Event Current QCC student
 Newspaper Ad Friend/Relative Direct College Mailing Tech Prep Counselor
 Television Admissions Representative Alumni

RESIDENCY INFORMATION

- Are you a United States citizen? Yes No If not, please complete the following:
■ Are you a Permanent Resident? Yes No (If yes, list alien registration number: _____)
■ If you are not a U.S. Citizen or Permanent Resident, please state your Visa or immigration status in detail: _____

■ **Please check the in-state or reduced tuition eligibility category that applies to you:**

- I have been a Massachusetts resident for six (6) continuous months and intend to remain here.
As proof of my intent to remain in Massachusetts, I possess at least 2 of the following documents, which I shall present to the institution upon request. These documents* are dated within one (1) year of the start date of the academic semester for which I seek to enroll (except possibly for my high school diploma). The institution reserves the right to make any additional inquiries regarding the applicant's status and to require submission of any additional documentation it deems necessary. Please check-off those documents you possess as proof of your intent to remain in Massachusetts.
- | | | |
|---|--|---|
| <input type="checkbox"/> Valid Driver's license | <input type="checkbox"/> Utility bills* | <input type="checkbox"/> Employment pay stub* |
| <input type="checkbox"/> Valid Car registration | <input type="checkbox"/> Voter registration* | <input type="checkbox"/> State/Federal tax returns* |
| <input type="checkbox"/> Mass. High School Diploma | <input type="checkbox"/> Signed lease or rent receipt* | <input type="checkbox"/> Military home of record* |
| <input type="checkbox"/> Record of parents' residency for unemancipated person* | <input type="checkbox"/> Other _____ | |
- I am an eligible participant in the New England Board of Higher Education's Regional Student Program.
 I am a member of the armed forces (or spouse or unemancipated child) on active duty in Massachusetts.

CERTIFICATION

I understand that any acceptance to Quinsigamond Community College does not guarantee placement in all courses required to complete a degree or certificate. Failure to assess into minimum level English and/or reading courses could prevent the enrollment in certain courses. I certify that this information is true and accurate. I understand that any misrepresentation, omission or incorrect information shall be cause for disciplinary action up to dismissal, with no right of appeal or to a tuition refund.

Applicant Signature: _____ Date _____

Parent/Guardian Signature (Applicant is Under 18 Years Old): _____ Date _____

APPLICATION FOR ADMISSION INFORMATION AND INSTRUCTIONS

Academic Guidelines

Minimum academic qualifications have been established for certain degree and certificate programs. Please contact an Admissions representative to determine your status and to review your academic background. This review will help you to determine which academic program may best suit your needs. Students are admitted to programs on a rolling basis once minimum admissions requirements are met. Programs are filled on a first-come, first-served basis

How to Apply

1. Please type or print your information on the application and return it to the Admissions Office with a check or money order (non-refundable) made payable to Quinsigamond Community College (QCC). Please do not send cash.
In the event you have already applied to another Massachusetts Community College, please enclose a photocopy of your cancelled check, or a written statement from that college indicating that your application fee has been paid.
If you have previously applied to Quinsigamond Community College, the application fee is not required. You may also request a waiver due to financial hardship.
2. The certification must be signed.
3. Request your high school guidance counselor to forward an official transcript of your high school record to the QCC Admissions Office.
4. If you have taken the high school equivalency exam (G.E.D.), request your testing center to forward an official copy of your scores (Form 30) to the QCC Admissions Office.

How to Transfer

You are welcome to transfer to Quinsigamond from another college or university; however, please comply with the procedures outlined above. To transfer your credits to Quinsigamond for advanced standing, ask the Registrar of any institution you have previously attended to forward an official transcript of your record.

Disabilities

(INCLUDED IN SECTION 504)

Quinsigamond Community College provides auxiliary aids and services to students with disabilities. If you have a disability, you will need to pay particular attention to the disability information included with the acceptance letter sent to all students admitted to the College.

Immunization Requirements

Quinsigamond Community College, in compliance with the Massachusetts Immunization Laws, requires that all students who attend full time, or are enrolled in a Health Science Program, present a physician's certificate indicating that the following immunizations have been received:

1. At least one dose of mumps and rubella vaccine(s) given at, or after, 12 months of age;
2. Two doses of live measles vaccine given at least one month apart, beginning at, or after, 12 months of age; and
3. A booster dose of Td within the last ten years.
4. Three doses of Hepatitis vaccine, the second dose given at least one month after the first dose, and the third dose given at least four months after the first dose

There are certain instances which do not require proof of immunization. Please consult the Immunization Form obtained in the Admissions Office, or the Admissions Staff for further information.

New England Regional Student Program (NERSP)

This program provides residents of other New England states an opportunity to attend Quinsigamond, paying state tuition plus a 50% surcharge. To be eligible for NERSP, students must be admitted to a Quinsigamond Community College program which is not offered at their own state colleges.

Quinsigamond Community College is an affirmative action/equal opportunity institution and does not discriminate on the basis of race, color, religion, creed, national origin, age, sex, sexual preference, genetic information, or disability status in its education programs or in admission to, access to, treatment in or employment in its programs or activities as required by Title VI, Civil Rights Act of 1964; Title IX, Education Amendments of 1972; Section 504, Rehabilitation Act of 1973; Americans with Disabilities Act, and regulations promulgated thereunder, 34 C.F.R. Part 100 (Title VI), Part 106 (Title IX) and Part 104 (Section 504). All inquiries concerning application of the above should be directed to the College's Affirmative Action Officer and/or the College's Coordinator of Title IX and Section 504.

Please complete this short form and return with your \$20 application fee (or \$50 if applicable).

Social Security Number _____

Name: _____
Last First Middle Initial

Address: _____
Box, Apt., Street Name and Number City State Zip Code

Study Option: _____

please check (✓) one below

- \$20 application fee enclosed for Massachusetts resident
- \$50 application fee enclosed for out-of-state and/or international student
- application fee previously paid to Massachusetts community college
- application fee waiver requested (please enclose letter stating need for waiver)

Please check (✓) which semester you wish to enter:

- Fall, 20__
- Spring, 20__
- Summer, 20__
- Intersession, 20__

Checks or Money Orders required. We cannot accept cash.

TUITION AND FEES*

Massachusetts Residents	\$129/credit (\$24 Tuition/\$105 Educational Services Fee)
All Other Students	\$335/credit (\$230 Tuition/\$105 Educational Services Fee) (Non-Residents, International Students)
Registration Fee per semester	\$55
Technology/Energy Fee (per semester)	
	1-8 credits: \$65
	9+ credits: \$120
Student ID Fee (per year)	\$25
Lab Fee (per course)	\$45
Parking Fee (per semester)	\$20
Student Activity Fee (per semester)	\$25

Insurance

Compulsory Health Insurance**	\$881/year (9 credits or more)
Allied Health Insurance	\$15/year (\$61.50 for EMT Programs) (For Allied Health Program Students only)

Notes:

- * Tuition and Fees are subject to change. Fees for certain programs may be different.
- ** The Massachusetts Universal Health Insurance Law requires all students enrolled for 9 or more credit hours to participate in a comprehensive health insurance plan unless they have alternative, comparable coverage.

FINANCIAL AID

QCC administers a variety of federal, state and institutional financial aid programs to assist students and their families with college costs. Assistance is offered through grant and scholarship; tuition waiver; work study employment and student or parent loan programs.

In order to be considered for financial aid you must complete the Free Application for Federal Student Aid (FAFSA) process, be accepted into an eligible degree or certificate program and demonstrate financial need.

Important Financial Aid Dates

The priority FAFSA filing date at Quinsigamond Community College is **April 1st** for Fall admissions applicants and **October 1st** for Spring admissions applicants. Many sources of funding are limited in availability, with the earliest applicants receiving priority consideration. To apply for the MassGrant program, you must have your FAFSA processed by May 1st. Students must reapply for financial aid each academic year.

Applicants can apply for admission and financial aid at the same time.

If you need assistance, contact the Financial Aid Office at 508-854-4261 or via email at financialaid@qcc.mass.edu.

Extensive information is also available on our web site www.qcc.edu/financialaid.html

STUDY OPTIONS

PLEASE NOTE: * Days Only ** Evenings Only

Associate in Arts

* Early Childhood Education (EC)	FastTrack Option (ECFT)
* Early Childhood Education – Transfer (ECTR)	General Studies (GS)
Community Health Option (GSCH)	Deaf Studies Option (GSDS)
Elementary Education Option (GSEE)	Occupational Education Option (GSOE)
Liberal Arts (LA)	

Associate in Applied Science

* Automotive Technology (AT)	Telecommunications Technology (TL)
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Associate in Science

* Allied Dental Services:	Health Sciences Option (ADHS)	Dental Sales/Marketing Option (ADDS)	Dental Office Management Option (ADDO)
* Applied Arts (Computer Graphic Design) (GA)	* Basic Engineering (BE)	Business Administration – Career	Business Administration Option (BB)
Administrative Professional Option (BBAP)	Business Administration – Transfer	FastTrack Option (BTFT)	Complementary Health (CHM)
Computer Information Systems	Applications Specialist Option (CIAS)	Programming Option (CIPR)	Computer Systems Engineering Technology (SE)
Computer Systems Engineering Technology –			

Forensics Option (SEF)	Criminal Justice (CJ)	FastTrack Option (CJFT)	* Dental Hygiene (DH)
Electromechanical Technology (Robotics and Automation Technology)	Career Option (EPCA)	Transfer Option (EPTR)	Electronics Technology
Biomedical Option (ELBI)	Electronics Option (ELET)	Fire Science (FS)	* Hotel and Restaurant Management
Hospitality Management Option (HMHO)	Foodservice Management Option (HMFO)	* Human Services (HA)	Manufacturing Technology (MP)
Medical Support Specialist:	Medical Assisting Option (MSMA)	* Nurse Education (NU)	* Occupational Therapy Assistant (OT)
* Paramedic Technology (EM)	* Radiologic Technology (RT)	* Respiratory Care (RS)	

Certificate Options

* Automotive Maintenance and Light Repair (AM)	Biotechnology Technician (BI)	Business Administration—Career	Business Administration Option (BAC)
Clerical Office Option (COBB)	Medical Office Option (MSBB)		

Computer Aided Design (CAD)	Computer Information Systems	Applications Specialist Option (CAS)	Web Applications Option (CWA)
* Dental Assisting (DA)	Early Childhood Education:	Early Childhood Education for Assistant Teachers Option (CEAT)	* Infant/Toddler Training Option (IC)
School Age Option (CSA)	Electronics Technology (CE)	* EMT Paramedic (PC)	* EMT Intermediate (EI)
Energy Utility Technology (EUTC)	* Hotel and Restaurant Management	Foodservice Management (FM)	Hospitality Management (HO)
* Human Services (HS)	Human Services – Direct Support (DSC)	Law Enforcement (LEC)	Manufacturing Technology (MPC)
* Medical Assisting (ME)	Network Specialist (NSC)	Personal Computer Specialist (PCS)	* Practical Nursing (LP)
* Surgical Technology (ST)			

Non-Degree Programs

* Twelfth Year (TY)
