



Section C

Supplemental Application/Registration Form

Current Information Must Be On File For All Students

Your answers on this Supplemental Application (Section "C") are important and required of all community college students in the State of Washington. The information gained will assist in measuring student progress toward their goals. New information has been added to this form as of July, 1993. You are not required to complete this form if you have done so as of July, 1993. If information has changed since you registered, please indicate changes.

Name _____ Student ID # _____

Quarter You Plan to Begin Attendance Summer Fall Winter Spring 20 _____

How long do you plan to attend Yakima Valley Community College?

- _____ 11 One quarter
- _____ 12 Two quarters
- _____ 13 One year
- _____ 14 Up to two years, no degree planned
- _____ 15 Long enough to complete a degree
- _____ 16 Don't know
- _____ 90 Other

What is your current work status while attending college?

- _____ 11 Full-time homemaker
- _____ 12 Full-time employment
(including self employed and military)
- _____ 13 Part-time off campus
- _____ 14 Part-time on campus
- _____ 15 Not employed, but seeking employment
- _____ 16 Not employed, not seeking employment
- _____ 90 Other

What is your prior level of education at entry to Yakima Valley Community College?

- _____ 11 Less than high school graduation
- _____ 12 GED
- _____ 13 High school graduate
- _____ 14 Some post high school, but no degree or certificate
- _____ 15 Certificate (less than two years)
- _____ 16 Associate degree
- _____ 17 Bachelor's degree or above
- _____ 90 Other

What was your family status when you started at the community college?

- _____ 11 A single parent with children or other dependents in your care
- _____ 12 A couple with children or other dependents in your care
- _____ 13 Without children or other dependents in your care
- _____ 90 Other

Please Mark one or more boxes to indicate what race you consider yourself to be?

- _____ African American (872)
- _____ Alaska Native (015)
- _____ American Indian (597)
- _____ Chinese (605)
- _____ Filipino (608)
- _____ Japanese (611)
- _____ Korean (612)
- _____ Native Hawaiian (653)
- _____ Vietnamese (619)
- _____ White (800)
- _____ Other Asian (621)
- _____ Other Pacific Islander (681)
- _____ Other Race (799)

Are you of Spanish/Hispanic/Latino ethnicity?

- No (999)
- Yes, Mexican, Mexican American, Chicano (722)
- Yes, Puerto Rican (727)
- Yes, Cuban (709)
- Yes, Other Spanish/Hispanic/Latino (717)

Optional Question: (Confidential information used for statistical reporting only)

Do you have a physical, sensory, or mental impairment which substantially limits one or more major life activities such as seeing, hearing, speaking, walking, learning, working, etc.

Yes No

Emergency Contact: _____

Telephone Number: _____