APPLICATION FOR ADMISSION

☐ Accounting Technology ☐ Medical Office Managemer		Child Care and Development Other Certificate:				
This application is for admission into the program beginning:						
* NOTE: Applicants must complete remedial requirements & program prerequisites by the application deadline of the term for which admission is sought.						
Date of Application:	Student ID#: Student E-	mail:				
Full Legal Name: Current mailing address:	Last First Street	Middle				
Current telephone: If you have previously attended		State Zip ed between 8 a.m. and 5 p.m. on weekdays) specify below:				
List other Career Technical Ed	lucation Schools/Programs you have or will apply to:	Date of Application				
PERSONAL INFORMATION Male Female	Place of Birth:					
☐ White ☐ Black ☐	affirmative action purposes only) ☐ Hispanic ☐ Native American ☐ Asian ☐ International	Prefer Not To Answer				
Emergency Contact: Name		Relationship				
Street Address City, State, Z	 Telephone					
	of a misdemeanor or felony (including deferred adjudication for rking violations)? *Note: DUI's, DWI's, PI's are not minor traffic anation.					
	ve high school, college, graduate or professional school or ever or scholarship? ☐Yes ☐ No If "Yes," provide a written explan					
purposes. The information you confidential. Please check all that applies to	ces for people with disabilities, the following voluntary information provide will not affect your admission to the Business Information you: physical disability	ion Technology programs and will be kept other disability				

EDUCATIONAL BACKGROUND						
List the high school you attended a	nd REQUEST THAT	AN OFFICIAL TRANS	SCRIPT be sent to the	address sh	nown below. *	
Last High School Attended:						
	School		City/State	Gradu	uation Date	
Please list each college or universit FROM EACH INSTITUTION SHOWIN	y that you have attend G ALL WORK ATTEMF	ded or will attend prior t PTED BE SENT DIRECT	o enrolling at TSC. (<i>RI</i> LY TO THE ADDRESS	EQUEST THA SHOWN BEL	AT AN OFFICIAL TRANSCRIPT LOW). *	
NAME OF SCHOOL	CITY	STATE	DATES ATTENDE	D	DIPLOMA/DEGREE	
NOTE: If you have attended more than three colleges, please list on a separate sheet.						
Entrance exam (TSI) must be successfully completed prior to consideration of this application. (Contact Testing Center in student services building to arrange testing.)						
Date taken:	Or Scheduled:					
List all college or university COURSES which you are currently enrolled or will have completed before the program begins, that DO NOT PRESENTLY APPEAR on your transcript.						
COLLEGE OR UNIVERSITY	COURSE NO.	COURSE T	ITLE	CREDIT HRS	TERM/YR	
I understand that the Admission Committe that these are submitted as promptly as pr soon as possible and at the end of each su acceptance must also be submitted.)	ossible. It is also my unde	erstanding that official trans	scripts sent directly from e	ach school I h	ave attended must be received as	
If selected for admission to this program I that the information in this application is co of any offer of acceptance, cancellation o	mplete and correct and u	nderstand that the submiss	ne rules and regulations o ion of false information is g	f the College, rounds for reje	Program and its affiliates. I certify ection of my application, withdrawal	
	-	Signature of Applic	ant		Date	
If there are circumstances which may I describe on a separate sheet and attac		our admission which you	would like for those revie	ewing your ap	pplication to know about, please	

DEADLINES FOR RECEIPT OF APPLICATION AND ALL REQUIRED DOCUMENTS:

PROGRAM	PROGRAM BEGINS	APPLICATION DEADLINE
Accounting Technology	Fall Semester	May 1
Business Management and Technology	Fall Semester	May 1
Child Care and Development	Fall Semester	May 1
Medical Office Management	Fall Semester	May 1
Paralegal Studies	Fall Semester	May 1
Other Certificate:	Fall Semester	May 1

^{*} Application, transcripts, and supporting documents should be mailed to:

(Indicate the Name of the Program) Texas Southmost College 80 Fort Brown Brownsville, Texas 78520-4993

The Texas Southmost College does not discriminate based on sex, race, color, national origin, handicap or age