



1415 E. Tudor Road · Anchorage, AK 99507
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 AlaskaCareerCollege.edu

APPLICATION FOR ADMISSION

(Revised 11/25/24)

ADMISSIONS REQUESTED FOR (Enter Program Name & Number) _____

LAST NAME: _____		FIRST NAME: _____		U.S. CITIZEN (IF NO, GIVE VISA TYPE): <input type="checkbox"/> YES <input type="checkbox"/> NO		SOCIAL SECURITY NO: _____													
PREVIOUS NAME(S), IF ANY: _____				U.S. ID Number _____															
CURRENT ADDRESS: _____				MARITAL STATUS: <input type="checkbox"/> SINGLE <input type="checkbox"/> SEPARATED <input type="checkbox"/> MARRIED <input type="checkbox"/> DIVORCED															
CITY: _____				STATE: _____		ZIP CODE: _____													
PHONE (HM) _____				PHONE (WK) _____		PHONE (MSG / CELL) _____													
E-MAIL ADDRESS: _____				PERMANENT ADDRESS: _____															
PLACE OF BIRTH (CITY & STATE): _____				DATE OF BIRTH: _____															
HOW DO YOU DESCRIBE YOURSELF:				GENDER:															
<input type="checkbox"/> Amer. Indian or AK Native - IN <input type="checkbox"/> Asian - AS <input type="checkbox"/> Hispanic/Latino - HI <input type="checkbox"/> Two or More Races - OT <input type="checkbox"/> Black or African Amer. - BL <input type="checkbox"/> White - WH <input type="checkbox"/> Native Hawaiian or Other Pacific Islander				<input type="checkbox"/> FEMALE <input type="checkbox"/> MALE <input type="checkbox"/> NOT SPECIFIED															
DO YOU HAVE A VALID DRIVER'S LICENSE? <input type="checkbox"/> YES <input type="checkbox"/> NO STATE: _____ NUMBER: _____				PLEASE NO DUPLICATE REFERENCES OR ADDRESSES															
HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENSE? <input type="checkbox"/> YES <input type="checkbox"/> NO (IF YES, GIVE DETAILS)				IN EMERGENCY - NOTIFY (NAME): _____															
REVIEWED BY: _____ DATE: _____				RELATIONSHIP: _____															
LIST YOUR MEDICAL CONDITIONS (use separate sheet if necessary)				ADDRESS: _____															
ARE THERE ANY REASONS WHY YOU CANNOT ACCEPT A JOB? <input type="checkbox"/> YES <input type="checkbox"/> NO (IF YES, EXPLAIN)				CITY: _____		STATE: _____													
EDUCATION: CIRCLE HIGHEST GRADE COMPLETED				CITY: _____		STATE: _____													
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;"></td> <td style="width:10%;">HIGH SCHOOL</td> <td style="width:10%;">9</td> <td style="width:10%;">10</td> <td style="width:10%;">11</td> <td style="width:10%;">12</td> </tr> <tr> <td></td> <td>COLLEGE</td> <td>1</td> <td>2</td> <td>3</td> <td>4 5</td> </tr> </table>					HIGH SCHOOL	9	10	11	12		COLLEGE	1	2	3	4 5	STATE: _____		ZIP CODE: _____	
	HIGH SCHOOL	9	10	11	12														
	COLLEGE	1	2	3	4 5														
SCHOOL NAME AND ADDRESS: _____		YEAR GRAD. & DEGREE _____		EMAIL: _____		PHONE (WK): _____													
HIGHSCHOOL _____		_____		PHONE (MSG / CELL): _____		PERSONAL REFERENCE (NAME): _____													
COLLEGE _____		_____		PERSONAL REFERENCE (NAME): _____		RELATIONSHIP: _____													
UNITED STATES MILITARY SERVICE				ADDRESS: _____															
BRANCH _____		DATE AND TYPE OF DISCHARGE _____		CITY: _____		STATE: _____													
_____		_____		ZIP CODE: _____		EMAIL: _____													
_____		_____		PHONE (WK): _____		PHONE (MSG / CELL): _____													

I certify that the information contained in this enrollment application is true and complete, and any misrepresentation, falsification or omission herein shall be sufficient reason for dismissal or refusal of admission. If accepted, I hereby give Alaska Career College the right and permission to use and/or publish photos and or videos of me for the purpose of publicity or advertising (to include the Internet) provided such photographs in no way involve defamation of character or misrepresentation of facts expressed or implied.
 ENCLOSED/ATTACHED IS MY APPLICATION FEE IN THE AMOUNT OF TWENTY-FIVE DOLLARS (\$25.00). PLEASE DO NOT MAIL CURRENCY.

Applicant Signature _____ **Date** _____

APPLICANT: DO NOT WRITE BELOW THIS LINE

INTERVIEW

APPEARANCE: _____		<ol style="list-style-type: none"> 1. Diploma/GED/Transcript 2. Picture ID 3. \$25 Application Fee 	
COMMUNICATION SKILLS: _____			
PERSONALITY: _____			
ADDITIONAL COMMENTS: _____			
VERIFIED BIRTHDATE _____		ID SOURCE _____	
<input type="checkbox"/> HIGH SCHOOL DIPLOMA / GED ATTACHED		<input type="checkbox"/> TRANSCRIPT REQUEST COMPLETED	
APPLICATION ACCEPTANCE APPROVED BY / DATE: _____			
ENROLLMENT ACCEPTANCE APPROVED BY / DATE: _____			
ENROLLMENT INTERVIEW BY: _____			
<input type="checkbox"/> ACCEPTED	<input type="checkbox"/> DENIED	CLASS # ASSIGNED: _____	START DATE: _____
		END DATE: _____	



Dear Alaska Career College Applicant,

If you do not have a copy of your GED or High School diploma to submit with your Application for Admission, Alaska Career College can assist in requesting for your high school document. If translation and equivalency determination services are required for foreign high school diploma/transcript, additional fees may be assessed. Complete this request form and present it along with your Application for Admission to Alaska Career College. Thank You!

ANCHORAGE SCHOOL DISTRICT GRADUATES

If you graduated high school in the Anchorage School District, follow this link to request your transcript for **FREE** <https://anchorageak.scriborder.com/application>

As you complete the transcript request form, click on this blue button, [Add Delivery Address](#) and add Alaska Career College as the college you would like to send your transcript to. Please allow 1-3 business days for processing.

EDUCATION TRANSCRIPT REQUEST

NAME: _____

NAME ON DIPLOMA/GED: _____

SOCIAL SECURITY NUMBER: _____ - _____ - _____

DATE OF BIRTH: _____ / _____ / _____

NAME OF SCHOOL ATTENDED/GED TESTING SITE:

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE: (_____) _____

FAX: (_____) _____

YEAR GRADUATED: _____

IF GED, TEST DATE: _____

PLEASE CHECK ONE BELOW:

- I will provide a copy of my high school completion/GED document/transcript.
- I request that the Admissions Office provide Alaska Career College with a copy of my transcript (unofficial is acceptable.) **I understand if my high school charges a fee at the time of request, I am required to pay the fee amount requested.** I understand that it is a requirement that Alaska Career College receives a copy of my high school completion or GED document prior to starting classes.

SIGNATURE _____	DATE _____
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