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## Review Application

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Please confirm your application is complete and accurate at the bottom of this page.

Note: All tabs must be checked complete before you can confirm.

### Enrollment Information

Term	Fall 2014
Major/Program area of study	LMC Business Administration for Transfer (AST)
Educational Goal	Transfer to a 4-year institution without an associate degree

### Account/Mailing Address

#### OpenCCC Account

Name	
Permanent Address	Oakley, CA 94561
Previous Name	
Main Phone	925-439-2181 Ext:
Second Phone	Ext:
Email	losmedanos.edu
Social Security Number	***-**-****
Date of Birth	

#### Mailing Address

Same as My Account	Yes
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### Personal Information

Gender	Female
Under Care of Parent/Guardian	No
Parent/Guardian Education Levels	1: Bachelor's degree (for example: BA, BS)

Introduction

Enrollment Information

Account/Mailing Information

Personal Information

Education

Citizenship/Military

Residency

Needs &amp; Interests

Consent

Review Application

Submission

2:	<b>High school graduate (diploma, GED, or equivalent)</b>
Hispanic/Latino	<b>No</b>
Race	<b>White</b>

  

<b>Education</b>	
Enrollment Status as of 08/14/2014	<b>First time at this college; have attended another college</b>
High School Education Level as of	<b>Received high school diploma from U.S. school</b>
High School Completion Date	<b>06/29/1972</b>
<b>Yes</b>	Received a diploma or certificate of completion in California
<b>Yes</b>	Attended high school in California for three or more years
High School or Homeschool	<b>Oceanside High, Oceanside, CA, US</b>
College Education Level as of 08/14/2014	<b>Received a bachelor's degree or higher</b>
College 1	<b>National University, La Jolla, CA, US</b> From: <b>08/01/2000</b> To: <b>07/01/2004</b> Degree: <b>Bachelor degree or higher</b> Date: <b>07/01/2004</b>
College 2	<b>Lake Tahoe Community College, South Lake Tahoe, CA, US</b> From: <b>09/01/1993</b> To: <b>06/01/2005</b> Degree: <b>Associate degree</b> Date: <b>06/01/1996</b>
College 3	<b>Point Loma Nazarene University, San Diego, CA, US</b> From: <b>09/01/1972</b> To: <b>03/01/1973</b> Degree: <b>No degree</b> Date:
College 4	<b>Miracosta College, Oceanside, CA, US</b> From: <b>01/01/1970</b> To: <b>05/01/1980</b> Degree: <b>No degree</b> Date:

  

<b>Citizenship/Military</b>	
Citizenship Status	<b>U.S. Citizen</b>
Military Status as of 08/14/2014	<b>None apply to me</b>

  

<b>Residency</b>	
<b>Yes</b>	Lived in California Continuously since 08/14/2012
<b>Yes</b>	Full-time employee, or a spouse or dependent of a full-time employee of a California college or university
<b>No</b>	Full-time credentialed employee of a California public school enrolling in college for purposes of fulfilling credential-related requirements

<b>No</b>	Employed as a seasonal agricultural for at least a total of two months of each of the past two years
<b>No</b>	Are you now, or have you ever been, a dependent or ward of the state through California's child welfare system
<b>No</b>	Since 08/14/2012 declared residency in another state for state income tax purposes When?:
<b>No</b>	Since 08/14/2012 voted or registered to vote in another state When?:
<b>No</b>	Since 08/14/2012 declared residency at an out-of-state college or university When?:
<b>No</b>	Since 08/14/2012 petitioned for a lawsuit or a divorce as a resident in another state When?:

#### Needs and Interests

<b>Yes</b>	Comfortable reading and writing English
<b>Yes</b>	Would like information about money for college
<b>No</b>	Receive TANF, SSI, or General Assistance
<b>No</b>	Former or current Foster Youth, interested in financial aid and/or other benefits and services available to Foster Youth

#### Programs and services in which you are interested

<b>Yes</b>	Academic Counseling/Advising
<b>No</b>	Athletics/Intercollegiate Sports
<b>Yes</b>	Basic Skills (reading, writing, math)
<b>Yes</b>	CalWorks
<b>Yes</b>	Career Planning
<b>Yes</b>	Child Care
<b>Yes</b>	Counseling - Personal
<b>Yes</b>	DSPS - Disabled Student Programs and Services
<b>Yes</b>	EOPS - Extended Opportunity Programs and Services
<b>Yes</b>	ESL - English as a Second Language
<b>Yes</b>	Health Services
<b>Yes</b>	Housing Information
<b>Yes</b>	Employment Assistance
<b>Yes</b>	Online Classes
<b>Yes</b>	Re-entry Program (after 5 years out)
<b>Yes</b>	Scholarship Information
<b>Yes</b>	Student Government

	Testing, Assessment, Orientation
<b>Yes</b>	Transfer Services
<b>Yes</b>	Tutoring Services
<b>Yes</b>	Veterans Services

**Consent****Yes**

I authorize the Chancellor's Office, California Community Colleges, and the community colleges I am attending to release personal information contained in my education records, including my Social Security Number, for the purposes described in the Full Statement of Consent.

**I have reviewed this application and confirm it is complete and accurate**