



Ranger Station  
1600 Chester Ave, Bremerton, WA 98337  
registration@olympic.edu

## Distance, Offsite, or Basic Studies Admissions and Registration Form

It is the policy of Washington's community and technical colleges to provide equal opportunity in education regardless of race, ethnicity, creed, color, national origin, sex, marital status, sexual orientation, age, religion, genetic information, gender identity, veteran status or the presence of any sensory, mental, or physical disability.

<b>Last name</b>	<b>First</b>	<b>Middle</b>	<b>Birthdate</b>
<b>Mailing address:</b> number and street or P.O. Box		<b>Apt #</b>	<b>Previous name(s)</b>
<b>City, State, ZIP Code</b>		<b>Mobile</b>	<b>Home</b> <b>Work</b>
<b>Personal email</b>		<b>Work email (optional):</b>	
<b>Emergency Contact</b>		<b>Phone</b>	
<b>*Social Security Number</b>	<b>ctcLink ID</b>	<b>Term:</b> Fall    Winter    Spring    Summer 20_____	

\*To comply with federal laws, we are required to ask for your Social Security Number (SSN) or Individual Taxpayer ID Number (ITIN). We will use your SSN/ITIN to report payments made by you that may qualify for a tax credit or a tax deduction on your income tax return. We may also use this information to administer state/federal financial aid, to verify enrollment, degree and academic transcript records, and to conduct institutional research. If you do not submit your SSN/ITIN, you will not be denied access to the college; however, you may be subject to an IRS penalty of \$50. Pursuant to state and federal law, the college will protect your SSN/ITIN from unauthorized use and/or disclosure.

**Type:**    First Year    Transfer    Full-time    Part-time /    Apprentice    Helper /    Adult Basic Ed    ESL

Add or Drop	Class Number	Subject Ex: English 101	Faculty Signature (digital signatures accepted)	Date	Over-enroll	Late add	Pre-reqs	Audit	Pass NC

I declare (or certify, verify, or state) under penalty of perjury that the foregoing is true and correct.

If New to OC or Returning after 5 or more years please complete the back of this form →

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ (digital signatures are accepted during the Governors Stay Home order)

**Office use only-**

Date received: \_\_\_\_\_ Credits: \_\_\_\_\_ Tuition/Fees \$: \_\_\_\_\_ Initials: \_\_\_\_\_

**SUPPLEMENTAL INFORMATION REQUIRED FOR ALL STUDENTS NEW TO OLYMPIC COLLEGE**

**Residency:** Please answer all questions *Response or non-response to this section will not affect your consideration for admission.*

- Yes No** Have you lived in Washington State for the past 12 consecutive months? If **no**, how long have you lived continuously in Washington? \_\_\_\_\_ months
- Yes No** Do you have a driver's license or state ID? Your current license/ID was issued in which state? \_\_\_\_\_
- Yes No** Do you drive a registered vehicle? The current registration for this vehicle was **issued** in which state? \_\_\_\_\_
- Yes No** Are you under the age of 24 years old?
- Yes No** Were you claimed for federal income tax purposes by your mother, father or legal guardian in the current or past calendar year?  
If **YES**, has your mother, father or legal guardian lived continuously in Washington for the past 12 months?  **Yes**  **No**
- Yes No** Are you receiving financial assistance from another state?
- Yes No** Are you an active duty member of the US Armed Forces or Washington National Guard?
- Yes No** Are you the spouse or dependent of an active duty military person stationed in Washington or a spouse/dependent of an active duty member of the Washington National Guard?
- Yes No** Have you separated from active duty military service in the last three years?

**Citizenship:** US citizen?  **Yes**  **No** **\*\*If not a US Citizen, country of citizenship** \_\_\_\_\_

**Gender** (providing this information is voluntary)

**Female**  **Male**  **Other** \_\_\_\_\_

**Immigrant or Permanent Resident: Permanent Resident Card #** \_\_\_\_\_

**Visitor Visa**  **Other** \_\_\_\_\_

Name of last high school attended OR GED earned, year _____	HS Code	City and State	Years attended	Graduated? Yes <input type="checkbox"/> Year _____ No, Highest grade completed _____
Name of last college, vocational/technical school attended	Code	City and State	Years attended	Graduated? Yes <input type="checkbox"/> No <input type="checkbox"/>

**Ethnicity:** (Providing this information is voluntary. The information is used for statistical purposes only.)

- American Indian/Alaska Native**
- Hispanic/Latino**
- Other**
- Asian**
- Native Hawaiian/Other Pacific Island**
- please specify:** \_\_\_\_\_

- Yes No** Has either of your parents earned a High School Diploma? Prefer not to answer
- Yes No** Has either of your parents earned a bachelor's (4-year) degree? Prefer not to answer
- Yes No** Are you currently employed? Full time? Part time?
- Yes No** Do you have children or other dependents who live with you or for whom you are responsible?
- Yes No** Veterans and/or their dependent(s) may qualify for educational benefits. Please indicate if you would like additional information.

**Bremerton Campus:** 1600 Chester Avenue | Bremerton, WA 98337 | 360.475.7650 | Fax: 360.475.7202 | www.olympic.edu  
**Poulsbo Campus:** 1000 Olympic College Way NW | Poulsbo, WA 98370 | 360.394.2725 | Fax: 360.394.2732  
**Shelton Campus:** 937 W. Alpine Way | Shelton, WA 98584 | 360.432.5400 | 360.432.5412