

# APPLICATION FOR ADMISSION



DAKOTA COUNTY  
TECHNICAL COLLEGE

A member of Minnesota State

Today's Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
To apply online, visit [www.dctc.edu/applynow](http://www.dctc.edu/applynow)

## PERSONAL INFORMATION

Full Name (first, middle, last)

Name used in high school records or in other educational records and transcripts (if different from above)

Social Security Number

*Many colleges/universities use social security numbers for student identification purposes on student records. Providing your Social Security number is voluntary. If you do not provide this number, your application will still be processed. This data is requested for purposes of administration, program evaluation and consumer and alumni data. Your number also may be used to create summary information about MnSCU programs through data matches with other state agencies.*

Current Mailing Address

City

State

ZIP

County

Home Telephone

Cell Phone

Email Address

( )

( )

Are you a resident of Minnesota?

If yes, how long?

If not, what state are you a resident of?

Yes  No

Years \_\_\_\_ Months \_\_\_\_

Are you a U.S. Citizen?  Yes  No

If you answered no, do you have status as  Resident alien  Refugee/asylee  Temporary protected status  None of these

If you answered none of these, do you have or intend to apply for a visa?  Yes\*  No

*\* If you answered yes, you must fill out a separate International Application. For more information, see: [www.dctc.edu/international](http://www.dctc.edu/international)*

## ADMISSIONS INFORMATION

You can apply to one program only. If you indicate undeclared or undecided, you will not be eligible for financial aid.

Major or Program of Interest (Limited to one)

Educational intent at Dakota County Technical College

Earn a certificate  Earn a diploma  Earn an associates degree

Semester and year you intend to start

I plan to attend

Fall  Spring  Summer Year \_\_\_\_\_

Full-time (12 credits or more)  Part-time (fewer than 12 credits)

Have you ever attended Dakota County Technical College?

If you answered yes, list last date attended

Yes  No

Month \_\_\_\_\_ Year \_\_\_\_\_

Are you now serving, or have you ever served, in the United States Armed Forces or Uniformed Services?

Yes  No

Are you a spouse or dependent of an individual that is now serving, or has ever served, in the United States Armed Forces or Uniformed Services?

Neither  Spouse  Dependent

## EDUCATION INFORMATION

Do you have a high school diploma?  Yes  No If yes, list date of graduation: Month \_\_\_\_\_ Year \_\_\_\_\_

Do you have a GED?  Yes  No If yes, list date of GED completion: Month \_\_\_\_\_ Year \_\_\_\_\_  
(You are required to submit a copy of your GED certificate.)

Do you currently attend high school?  Yes  No If yes, list intended date of graduation: Month \_\_\_\_\_ Year \_\_\_\_\_  
(Student who want to enroll through P.S.E.O. are required to complete a different admissions process meeting specific deadlines and requirements.)

### High school attended

\_\_\_\_\_  
Name City State

List all colleges/universities attended (attach additional sheets of paper if needed)

\_\_\_\_\_  
Name City State Month/Year

\_\_\_\_\_  
Name City State Month/Year

\_\_\_\_\_  
Name City State Month/Year

## DEMOGRAPHIC INFORMATION

Providing the following information is voluntary and will assist Minnesota State in evaluating student recruitment and retention policies; it will not be used as a basis for admission.

Gender  Male  Female Are you Hispanic or Latino?  Yes  No

Race and ethnic background (select all that apply)

American Indian or Alaska Native  Black or African American  White  
 Asian  Native Hawaiian or Other Pacific Islander

What is the highest level of education for your parent(s)/guardian(s)?

Parent/Guardian #1

No high school diploma  High school diploma  Some college  
 Two-year college degree  Bachelor's degree or higher  Unknown

Parent/Guardian #2

No high school diploma  High school diploma  Some college  
 Two-year college degree  Bachelor's degree or higher  Unknown

## SIGNATURE

All of the information indicated is true and complete to the best of my knowledge.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

## SUBMIT YOUR APPLICATION

Please submit your completed application along with the \$20 application fee (payable to DCTC) to:

Dakota County Technical College  
Office of Admissions  
1300 145<sup>th</sup> St. E.  
Rosemount, MN 55068

*DCTC abides by the provisions of Title IX, federal legislation forbidding discrimination on the basis of sex, race, color, national origin or handicap and all other state and federal laws regarding equal opportunity. This document is available in alternative formats to individuals with disabilities by calling 651-423-8000 or TTY: 651-423-8621.*

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