



WAYCROSS CAMPUS • 1701 CARSWELL AVE • WAYCROSS, GA 31503 • PHONE (912) 287-6584
 ALMA CAMPUS • 101 WEST 17TH ST • ALMA, GA 31510 • PHONE (912) 632-0951
 TOLL FREE (877) ED AT OTC

APPLICATION FOR READMISSION

Important: All sections must be completed. Incomplete applications will not be accepted.

Social Security Number _____ -- _____ -- _____	Today's Date _____ / _____ / _____
Last Name _____	First Name _____ MI _____
Address _____	City _____ State _____
Zip _____ County _____	Home Phone Number _____
Business Phone Number _____	Cell Phone Number _____
Former Name, if applicable _____	Email _____
	Last Date of Attendance _____

RESIDENCY DATA

Are you applying for in-state tuition? Yes No

Are you under 24 years of age? Yes No

If YES, did your parents or legal guardian claim you on their most recent Federal tax return? Yes No

If YES, what is the state of legal residence of the parent (s) or legal guardian who claimed you? _____

Has this person lived in that state for the last 12 consecutive months? Yes No

If you are over 24 (or if you are under 24 and no one claimed you on the most recent tax return), have you been a Georgia Resident for the last 12 consecutive months? Yes No

ENTRANCE DATA **Check one:**

Campus: Waycross Alma

Beginning Term: Fall Semester Spring Semester Summer Semester

Section: Day Evening

Type of Award: Associate Degree Diploma Program Technical Certificate Other _____

Program or Course for which you are applying: _____

MILITARY INFORMATION (The following information will be used to establish residency for tuition and financial aid eligibility. Failure to provide accurate, valid information may impact tuition and/or result in repayment of any financial aid funds received.)

Are you currently active duty, a veteran, a member of the National Guard, or a Reservist in the U.S. Armed Forces? Yes No

If YES, please check the appropriate box:
 Active Air Force Active Army Active Coast Guard Active Marine Active Navy National Guard Veteran Reservist

Are you a dependent/spouse of an active duty member, veteran, member of the National Guard, or a Reservist in the U.S. Armed Forces? Yes No

If YES, please check the appropriate box:
 Active Air Force Active Army Active Coast Guard Active Marine Active Navy National Guard Veteran Reservist

EDUCATIONAL DATA

Have you attended other colleges since leaving OTC? Yes No

Have you received a Bachelor's degree? Yes No

	Name of School	City and County	State	Year(s) Attended
Technical/College				
Technical/College				
Other				

An official transcript from each institution listed above must be submitted.

Did your father graduate from college? Yes No Unknown

Did your mother graduate from college? Yes No Unknown

EMERGENCY CONTACT

Please provide the name and telephone number of the person who should be contacted in case of an emergency.

Name _____ Relationship _____

Home Phone Number _____ Cell Phone Number _____ Business Phone Number _____

NEWS RELEASE STATEMENT

I, the undersigned, do hereby give permission to Okefenokee Technical College to use my name and/or photograph picturing or naming me in a school/work related situation.

Signature _____ Date _____

I certify the information I have given is correct to the best of my knowledge. I understand that failure to give accurate and complete information may be sufficient cause for rejection or dismissal without refund. Upon acceptance to Okefenokee Technical College (OTC), I agree to abide by the rules, regulations and guidelines as set forth in the Student Handbook. I give OTC permission to award me any certificate, diploma or degree that I complete. I further authorize Okefenokee Technical College to request and receive academic information from any school I previously attended. I give OTC permission to contact me at the telephone numbers I have provided via any means, including text message or voice.

Signature _____ Date _____

Okefenokee Tech is accredited by the Southern Association of Colleges and Schools Commission on Colleges and is a unit of the Technical College System of Georgia.

Pursuant to O.C.G.A. 16-10-20, it is a felony to make a false statement on any state document. In addition, making a false statement on this application may result in your dismissal from the college.

In accordance with the Technical College System of Georgia Policy V.B.3.Residency, each college shall be responsible for the verification of the lawful presence in the United States of every successfully admitted student applying for Georgia resident tuition status as required by state and federal immigration laws.

As set forth in the student catalog, Okefenokee Technical College (OTC) does not discriminate on the basis of race, color, creed, national or ethnic origin, gender, religion, disability, age, political affiliation or belief, genetic information, veteran status, or citizenship status (except in those special circumstances permitted or mandated by law). The following person(s) has been designated to handle inquiries regarding the non-discrimination policies: Title IX Contact: Danita Cannon, VP for Student Affairs, 912-287-5806 or dcannon@okefenokeetech.edu ; Section 504 Contact: Karen Boyle, Retention Coordinator, 912-285-6119 or kboyle@okefenokeetech.edu or write 1701 Carswell Avenue, Waycross, GA 31503.

Revised 3/13