



Application Procedures:

1. Submit Admissions Application and a one-time, non-refundable \$20.00 fee. Application fee is waived for readmission or change of major applications.
2. Submit an official high school or GED transcript.
3. Submit official transcripts from all colleges you have previously attended.
4. Take the placement test or submit valid SAT, ACT, COMPASS or ASSET

APPLICATION FOR ADMISSION / READMISSION

PLEASE PRINT CLEARLY Social Security Number:

LAST NAME	FIRST NAME	MIDDLE NAME	FORMER NAME(S) if any	
MAILING ADDRESS	CITY	STATE	ZIP	COUNTY
HOME TELEPHONE		WORK TELEPHONE		CELL TELEPHONE
EMAIL ADDRESS				DATE OF BIRTH
EMERGENCY CONTACT INFORMATION:				
NAME		TELEPHONE	RELATIONSHIP	

STATISTICAL DATA * This voluntary information is required for purposes of reporting to the Federal Compliance agencies only and will not be used in determining admission status.

GENDER*	ETHNIC ORIGIN*	RACIAL GROUP* Check all races that apply:	
<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	Are you Hispanic or Latino? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> AMERICAN INDIAN or ALASKA NATIVE <input type="checkbox"/> ASIAN <input type="checkbox"/> BLACK or AFRICAN AMERICAN	<input type="checkbox"/> NATIVE HAWAIIAN or OTHER PACIFIC ISLANDER <input type="checkbox"/> WHITE

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 MILITARY? YES NO ARE YOU A U.S. CITIZEN? YES NO

ARE YOU A MILITARY DEPENDENT? YES NO IF NO, CHECK ONE OF THE FOLLOWING:

ARE YOU A VETERAN? YES NO ALIEN, NON-RESIDENT

FILE NUMBER _____ ALIEN, RESIDENT

ARE YOU UNDER THE AGE OF 24? YES NO

IF YOU ARE UNDER THE AGE OF 24: Did your parent(s) or legal guardian claim you on their most recent tax return? YES NO

IF YES: What is the state of legal residence of the parent(s) or legal guardian who claimed you? _____

How long has that parent or legal guardian continuously lived in that state? ____years ____months

IF NO, ANSWER THE FOLLOWING QUESTIONS

IF YOU ARE 24 OR OLDER (OR UNDER 24 AND NO PARENT OR LEGAL GUARDIAN CLAIMED YOU ON THEIR MOST RECENT TAX RETURN):

What is your state of legal residence? _____

How long have you continuously lived in that state? ____years ____months

CHECK ALL THAT APPLY:

I HAVE ATTENDED SOUTHWEST GEORGIA TECHNICAL COLLEGE (SWGTC) BEFORE (Last quarter attended _____, Year _____)

If you have not been enrolled at SWGTC within the last five (5) years, you will need to resubmit ALL transcripts.

Have you attended any other colleges since attending SWGTC? Yes No

I AM **TRANSFERRING** FROM ANOTHER COLLEGE (List all colleges previously attended on the reverse side)

I AM CURRENTLY A **HIGH SCHOOL STUDENT** (Please check one of the following): ACCEL DUAL ENROLLMENT JOINT ENROLLMENT

I AM ENROLLING AS AN **AUDIT STUDENT** (No grade or credit received and not eligible for financial aid)

I AM A **SENIOR CITIZEN** SEEKING A TUITION WAIVER (You must be 62 or older and provide proof of age and legal Georgia Residency)

I AM A STUDENT AT ANOTHER COLLEGE SEEKING TO TAKE COURSE(S) AT SWGTC AS A **TRANSIENT STUDENT** (Transient agreement from your home college is required for acceptance and registration each quarter)

I AM SEEKING **SPECIAL ADMIT STATUS** (not seeking an award or financial aid)

<p>CHECK ONE: <input type="checkbox"/> I GRADUATED FROM HIGH SCHOOL. WHAT YEAR? _____</p> <p>HIGH SCHOOL _____</p> <p>CITY _____ STATE _____</p> <p><input type="checkbox"/> I WILL GRADUATE FROM HIGH SCHOOL IN 20____</p>	<p><input type="checkbox"/> I AM A HOME SCHOOL GRADUATE. WHAT YEAR? _____</p> <p><input type="checkbox"/> I OBTAINED A GED. WHAT YEAR? _____</p> <p>WHAT STATE? _____</p> <p><input type="checkbox"/> IF NO HIGH SCHOOL OR GED, LIST HIGHEST _____</p> <p>GRADE COMPLETED</p>
--	---

PLEASE LIST ALL COLLEGES THAT YOU ARE CURRENTLY OR HAVE PREVIOUSLY ATTENDED, BEGIN WITH THE MOST RECENT. Failure to list all colleges previously attended may impact tuition and/or result in repayment of any financial aid funds received.

COLLEGE/UNIVERSITY/TECHNICAL COLLEGE	CITY/STATE	YEARS ATTENDED
_____	_____	From: _____ To: _____
_____	_____	From: _____ To: _____
_____	_____	From: _____ To: _____
_____	_____	From: _____ To: _____
_____	_____	From: _____ To: _____

QUARTER YOU WISH TO BEGIN TAKING CLASSES AT SWGTC: <input type="checkbox"/> SUMMER (July) <input type="checkbox"/> WINTER (January) <input type="checkbox"/> FALL (October) <input type="checkbox"/> SPRING (April)	CAMPUS YOU WISH TO ATTEND: <input type="checkbox"/> THOMASVILLE [T] <input type="checkbox"/> MITCHELL [M] <input type="checkbox"/> GRADY [G]	SCHEDULE TYPE: <input type="checkbox"/> DAY ONLY <input type="checkbox"/> NIGHT ONLY <input type="checkbox"/> DAY AND NIGHT
--	--	---

Choice of Program: _____
 Please write the program code, level, campus, and start quarter you are seeking. Unless specified, programs begin each quarter. **Choose only one.**

Associate Degrees			
THN3 AAS-Technical Studies [T]	CIN3 Networking Specialist [T]	ML03 Clinical Laboratory Technology [T]	
AC03 Accounting [T]	CS13 Crime Scene Investigation Technology (T)	MS03 Management/Supervisory Development [T]	
GTN3 Agricultural Technology (Fall) [T]	CI03 Criminal Justice Technology [T] [G]	MA03 Medical Assisting [T]	
BAT3 Business Administrative Technology [T] [G]	DR03 Drafting Technology [T]	SW03 Social Work [T]	
CMU3 Computer Support Specialist [T]	OO03 Early Childhood Care/Education [T] [G]		

Diplomas			
AC02 Accounting [T]	CMU4 Computer Support Specialist [T]	IEA2 Industrial Electrical Technology [T]	
AI02 Air Conditioning Technology [T]	CS02 Cosmetology [T] [M]	MS02 Management/Supervisory Development [T]	
UTA4 Automotive Technology [T]	CI02 Criminal Justice Technology [T] [G]	MA02 Medical Assisting [T]	
BAT2 Business Administrative Technology [T] [G]	DR02 Drafting Technology [T]	PN04 Practical Nursing [T] [G]	
CIN4 Networking Specialist [T]	OO02 Early Childhood Care/Education [T] [G]	WJ02 Welding & Joining Technology [T]	

Technical Certificates			
SDC1 Administrative Support Specialist [T]	EMB1 Emergency Medical Technology - Basic (Fall) [T]	SDF1 Medical Language Specialist [T] [G]	
AGT1 Agricultural Technician [T]	EMO1 Emergency Medical Technology - Intermediate (Fall) [T]	5BC1 Network Administrator [T]	
ACM1 A/C System Maintenance Technician [T]	5BR1 Flat Shield Metal Arc Welder [T]	5BD1 Network Technician [T]	
ADA1 Architectural Drafting Specialist [T]	5BW1 Gas Metal Arc Welder Fabricator [T]	TTP1 Patient Care Assisting [T] [G]	
5AS1 Auto Electrical/Electronic Systems [T]	GM11 General Maintenance Technician [T]	5AP1 Payroll Accounting Specialist [T]	
BMI1 Biomedical Electronics Technician [T]	5CJ1-PH02 Healthcare Assistant 5CJ1-Pharmacy Tech [T]	RR01 Residential Wiring Technician [T]	
DOP1 CAD Operator [T]	5CJ1-ST02 Healthcare Assistant 5CJ1-Surgical Tech [T]	SHT1 Shampoo Technician [T] [M]	
CSA1 Certified Customer Service Specialist [T]	HHS1-NUN3 Healthcare Sciences HHS1-ADN Generic [T]	SP00 Special Admit Student [T] [M] [G]	
WAD1 Certified Warehousing & Distribution Specialist [T]	HHS1-NUP3 Healthcare Sciences HHS1-LPN to ADN Bridge [T]	5AZ1 Supervisor/Management Specialist [T]	
CDE1 Child Development Specialist [T, M, G]	HHS1-PH03 Healthcare Sciences HHS1-Pharmacy Tech [T]	5DQ1 Technical Communications [T] [G]	
5BG1 Cisco Network Specialist [T]	HHS1-RT03 Healthcare Sciences HHS1-Radiologic Tech [T]	UIP1 Unit Secretary [T]	
PKP1 Clinic Assistant (Summer) [T]	HHS1-RE03 Healthcare Sciences HHS1-Respiratory Care [T]	5BS1 Vertical Shielded Metal Arc Welder Fabricator [T]	
SAT1 CompTIA A+ Certified Technician Preparation [T]	HHS1-ST03 Healthcare Sciences HHS1-Surgical Tech [T]	TR00 Transient Admit [T]	
DRT1 Drafter's Technician [T]	5AJ1 Lathe Operator [T]		
ELG1 E-Learning Design & Development Specialist [T]	LEI1 Law Enforcement Investigation Assistant [T] [G]		
	5DO1 Medical Billing Clerk [G]		

***Competitive Admission Programs: Please apply for the appropriate Healthcare Assistant or Healthcare Science Certificate above. A separate Competitive Admission Application must be completed by the posted deadline date for your intended program. Students without a separate Competitive Admission Application on file will NOT be considered for competition.**

Associate Degrees (Select HHS1 above)		Diplomas (Select 5CJ1 above)	
NUN3* Nursing (Summer) [T]	PH03* Pharmacy Technology (Winter) [T]	ST03* Surgical Technology (Winter) [T]	
NUN3* Nursing (Winter) [T]	RT03* Radiologic Technology (Summer) [T]	EM02* Paramedic Technology (Winter) [T]	
NUP3* Nursing LPN - ADN Bridge (Winter) [T]	RE03* Respiratory Care Technology (Fall) [T]	PH02* Pharmacy Technology (Winter) [T]	
EM03* Paramedic Technology (Winter) [T]			

In accordance with the SWGTC document retention policy, application and supporting documents (including transcripts from high school and previously attended college(s)) will be destroyed one calendar year after the date of application for students who do not enroll.

I certify that the information I have given is correct to the best of my knowledge. I acknowledge that failure to give complete and accurate information may invalidate my application and admission to Southwest Georgia Technical College (SWGTC) and result in the loss of financial aid and require repayment to the College of any funds awarded. I understand that I am responsible for any fees not covered by my Financial Aid. I also give permission for my likeness, voice, or comments to be used in any promotional item on behalf of SWGTC or the Technical College System of Georgia.

Signature: _____ Date: _____

Southwest Georgia Technical College is a unit of the Technical College System of Georgia.

As set forth in its student catalog, Southwest Georgia Technical College does not discriminate on the basis of race, color, creed, national or ethnic origin, gender, religion, disability, age, political affiliation or belief, veteran status, or citizenship status (except in those special circumstances permitted or mandated by law).

The Title IX Coordinator: Joyce Halstead, VPSA, SWGTC Building A, (229) 225.5062. ADA/Section 504 Coordinator: Alison Welch, SWGTC Building A, (229) 227.2793.