

APPLICATION FOR ADMISSION

Thank you for your interest in Southeast Community College! If you are not seeking a degree from SCC and plan to enroll in only a few courses without receiving financial aid assistance, you do not need to apply for admission to the College. Registration for individual courses as a Visiting Student can be completed with assistance from an Admissions Counselor and/or at the Registration and Records Office. Individuals not seeking a degree from SCC and who desire to register for classes online should complete the <u>Visiting Student Application</u> at **www.southeast.edu/applynow**.

FOR OFFICE USE ONLY:	
Application received	
pp	

You may complete and submit the application form online at **www.southeast.edu/applynow** or complete and mail this paper application to the Admissions Office on the campus you plan to attend. (Completion of ALL sections on this form is REQUIRED. Please use blue or black ink.)

What is the highest school your parent 2/guardian completed? Middle/Jr. High High School/GED* Some College less than a Bachelor's Degree Bachelor's Degree or higher Other/Unknown I have (Choose One): Graduated/will graduate from high school prior to enrollment at SCC Earned a GED* Graduated/will graduate from a certified home-school pro NAME OF SCHOOL CITY STATE Month: Year: Year: No If yes, please submit an official transcript and complete the following: NAME OF COLLEGE/UNIVERSITY ATTENDED CITY/STATE DATES OF ATTENDANCE (MONTH/YEAR) NAME OF COLLEGE/UNIVERSITY ATTENDED CITY/STATE DATES OF ATTENDANCE (MONTH/YEAR) ANTICIPATED START DATE Some programs have limited enrollment and may not intake new students every term. If the term you requested is not available, your application will be processed for the next available starting to Summer 2025 Fall 2025 Spring 2026 Summer 2026 Fall 2026 Spring 2027 Summer 2027 Fall 2027 STUDENT STATUS Iama: New student Former student Transfer student Current SCC student Iama: Nebraska resident Out-of-State resident	PERSONAL IN	IFORMATION						
The property of the property o	Full legal name:	EIDCT		MIDDI F	LACT			
The your an international student who will be requesting an I-20 from SCC for an F I Visia? Visic No Current mailing address SIRALIPEX SECRET SIRALIPEX SECR				MIDDLL				
Current mailing address STECTIVO BOLID				rom SCC for an E1 Visa?		(IF DIFFERENT THAN	I LEGAL FIRST NAME)	
Permanent mailing address Consider Not Not 29 National Cult National Section	•		e requesting air i 20 i	Tom Sec for all 11 visa:	□ 1€3 □ NO			
Complete record and the control of	Current mailing address	.S	STREET/P.O. BOX #		CITY	STATE ZIP	NEBRASKA (COUNTY NUMBER OR NAME
ay administric your cell phone number; you agree to receive enrollment related sext messages from SCC Admissions, Adviseg, Financial Aid, and Registration, up to aggresimately 6 messages from SCC Admissions, Adviseg, Financial Aid, and Registration, up to aggresimately 6 messages from SCC Admissions, Adviseg, Financial Aid, and Registration, up to aggresimately 6 messages from SCC Admissions, Adviseg, Financial Aid, and Registration, up to aggresimately 6 messages from SCC Admissions, Adviseg, Financial Aid, and Registration, up to aggresimately 6 messages from SCC Admissions, Adviseg, Financial Aid, and Registration, up to aggresimately 6 messages from SCC Admissions, Adviseg, Financial Aid, and Registration, up to aggresimately 6 messages from SCC Admissions, Adviseg, Financial Aid, and Registration, up to aggresimately 6 messages from SCC Admissions, Adviseg, Financial Aid, and Registration, up to aggresimately 6 messages from SCC Admissions for Admissions from the School Afficial Admission from Financial Aid Admissions from Financial Aid Aid Aid Aid Registration from Financial Aid	Permanent mailing add (IF DIFFERENT FI	ROM ABOVE)	STREET/P.O. BOX#		CITY	STATE ZIP	NEBRASKA (COUNTY NUMBER OR NAME
According to a contract in case of emergency Mark Support Mark	Cell phone:	(Alternate phone: ()			
Sex assigned at birth: Male Female Ethnicity (select one): Hispanic or Latino Not Hispanic Not Latino Not Hispanic Not Latino Not L	Message & data rates may	apply. You can opt out	at any time by texting ba	ack: Unsubscribe, Stop, Canc	el, End, Quit. All info	rmation is protecte		. , ,
Page (select one or more): American Indian or Alaska Native Asian White Black or African American Native Hawaiian or Other Pacific Island Personal Email (Please do not use a school affiliated email address): The College roudinely communicates important information to students via email.)	Social Security #:		_ (as printed on your	Social Security card)	Date of birth	/	_ /	
The College routinely communicates important information to students via email.) EMERGENCY CONTACT INFORMATION Person to contact in case of emergency: NAME RELATIONSHIP TO APPLICANT AREA CODE AND PHORE # SUPPORT PERSON INFORMATION From time as to time as to time as to a war information from your and one of without your written consent does a text of a contact in case of emergency: NAME RELATIONSHIP TO APPLICANT AREA CODE AND PHORE # SUPPORT PERSON INFORMATION From time as to time as to time as to a war information from your and other record without your written consent does a text of a contact in the college actual get for more information). This information may be the same or different from your Emergency Contact. SUP SIME ZIP								n or Other Pacific Islander
EMERGENCY CONTACT INFORMATION Person to contact in case of emergency: NAME	Personal Email (Please	do not use a school	affiliated email addre	, -				
Person to contact in case of emergency: MANUE	Recorded for Department of E	Education reporting needs		(The College routinely	communicates impo	rtant information t	o students via email.)	
SUPPORT PERSON INFORMATION — From time to time, SCC will contact important people in your life to share general information about the College SCC will not share this information with any other organization or use it to share information from your student record without your written consent (see EERPX Section in the College Catalog for more information). This information may be the same or different from your Emergency Contact.	EMERGENCY	CONTACT INFO	ORMATION					
SUPPORT PERSON INFORMATION — from time to time, SCC will contact important people in your life to share general information about the College SCC will not share this information with any other organization or use it to share information from your Emergency Contact. Social in the College Catalog for more information. This information may be the same or different from your Emergency Contact.	Person to contact in case o	of emergency:						
SCC will not share this information with any other organization or use it to share information from your Emergency Contact. Email Address	CLIDDORT DE	DCON INFORM						
Asiling Address STREET/RO. BOX.II	SCC will not share t	this information with	any other organization	on or use it to share infoi	mation from your	student record \	without your written c	ation about the College. onsent (see FERPA
STREETIPOL BOX # GIPY STATE ZIP MILITARY EXPERIENCE We you planning to use G.I. Bill Benefits? Yes No	Name:				Email Address:			
MILITARY EXPERIENCE We you planning to use G.I. Bill Benefits?	Mailing Address							
MILITARY EXPERIENCE The you planning to use G.I. Bill Benefits? Yes No	Relationship: □ Parent □	,		ate):				
Reversible Properties Pro	·	•						
### EDUCATIONAL HISTORY Midale	MILITARY EXP	PERIENCE						
What is the highest school your parent 1/guardian completed? Middle/Ir. High High School/GED* Some College less than a Bachelor's Degree Bachelor's Degree or higher Other/Unknown What is the highest school your parent 2/guardian completed? Middle/Ir. High High School/GED* Some College less than a Bachelor's Degree Bachelor's Degree or higher Other/Unknown what is the highest school your parent 2/guardian completed? Middle/Ir. High High School/GED* Some College less than a Bachelor's Degree Bachelor's Degree or higher Other/Unknown what is the highest school your parent 2/guardian completed? Middle/Ir. High High School/GED* Some College less than a Bachelor's Degree Bachelor's Degree or higher Other/Unknown what is the highest school your parent 2/guardian completed? Other/Unknown what is the highest school your parent 2/guardian completed? Other/Unknown what is the highest school your parent 2/guardian completed? Other/Unknown what is the highest school your parent 2/guardian completed? Other/Unknown what is the highest school your parent 2/guardian completed? Other/Unknown what is the highest school your parent 2/guardian completed? Other/Unknown what is the highest school your parent 2/guardian completed while graduate from a certified home-school problem. State	Are you planning to use G.	I. Bill Benefits? ☐ Yes	□ No If you	ı are planning to use military e	ducational benefits, ple	ease contact the SCC	Veterans Services Specialist	at militarybenefits@southeast.ed
What is the highest school your parent 2/guardian completed? Middle/Jr. High High School/GED* Some College Less than a Bachelor's Degree Bachelor's Degree or higher Other/Unknown have (Choose One): Graduated/will graduate from high school prior to enrollment at SCC Earned a GED* Graduated/will graduate from a certified home-school pro	EDUCATIONA	AL HISTORY						
have (Choose One): Graduated/will graduate from high school prior to enrollment at SCC Earned a GED* Graduated/will graduate from a certified home-school pro NAME OF SCHOOL CITY STATE	What is the highest school	your parent 1/guardian	completed? Middle/Jr.	High □ High School/GED®	□ Some College □ les	s than a Bachelor's De	gree □ Bachelor's Degree o	r higher
NAME OF SCHOOL Year: Year: Ompleted courses at another college or university (including dual credit) Yes No If yes, please submit an official transcript and complete the following: NAME OF COLLEGE/UNIVERSITY ATTENDED CITY/STATE DATES OF ATTENDANCE (MONTH/YEAR)	What is the highest school	your parent 2/guardian	completed? Middle/Jr.	High ☐ High School/GED®	□ Some College □ les	s than a Bachelor's De	gree □ Bachelor's Degree o	r higher
Month: Year: Completed courses at another college or university (including dual credit)	have (Choose One):	☐ Graduated/will gra	duate from high schoo	l prior to enrollment at SC	C 🗆 Earned a GEI	O° □ Graduated,	will graduate from a ce	ertified home-school progran
Month: Year:		NAME OF SCHOOL				CITY		STATE
Completed courses at another college or university (including dual credit)								
NAME OF COLLEGE/UNIVERSITY ATTENDED CITY/STATE DATES OF ATTENDANCE (MONTH/YEAR) ANTICIPATED START DATE Some programs have limited enrollment and may not intake new students every term. If the term you requested is not available, your application will be processed for the next available starting to Summer 2025					□ No If yes,	please submit an offici	al transcript and complete the	? following:
ANTICIPATED START DATE Some programs have limited enrollment and may not intake new students every term. If the term you requested is not available, your application will be processed for the next available starting to Summer 2025	NAME OF COLLE	GE/UNIVERSITY ATTENDED		CITY/STATE		DATES OF ATT	ENDANCE (MONTH/YEAR)	
Some programs have limited enrollment and may not intake new students every term. If the term you requested is not available, your application will be processed for the next available starting to Summer 2025	NAME OF COLLE	:GE/UNIVERSITY ATTENDED		CITY/STATE		DATES OF ATT	ENDANCE (MONTH/YEAR)	
□ Summer 2025 □ Fall 2025 □ Spring 2026 □ Summer 2026 □ Fall 2026 □ Spring 2027 □ Summer 2027 □ Fall 2027 STUDENT STATUS am a: □ New student □ Former student □ Transfer student □ Current SCC student □ Am a: □ Nebraska resident □ Out-of-State r	ANTICIPATED	START DATE						
l am a: □ New student □ Former student □ Transfer student □ Current SCC student □ l am a: □ Nebraska resident □ Out-of-State reside			_	•	•		•	-
l am a: □ New student □ Former student □ Transfer student □ Current SCC student lam a: □ Nebraska resident □ Out-of-State reside	STUDENT STA	ATUS						
			ıdent 🗆 Transfer	student	C student	l am a: □	Nebraska resident	☐ Out-of-State resident
LOCATION - PLEASE SELECT THE LOCATION YOU PLAN TO ATTEND Please note: not all programs are offered at every local								

☐ **Beatrice Campus** 4771 W. Scott Rd., Beatrice, NE ☐ **Lincoln Campus** 8800 O Street, Lincoln, NE ☐ **Milford Campus**600 State St., Milford, NE

□ **Online** (For programs designated with an "O" on page 2.)

Academic Transfer (AA) B/L/M/O Examples: education, humanities, social science, social work (transfer to 4-year institution) Diploma Precision Machining & Automation Technology.... M Data Science . . . Advanced CNC & Automation - AAS Associate of Science Tool Maker Mold & Die - AAS Design & Drafting Technology L Architectural Design (AAS) Computer Aided Design Drafting (AAS) Designing Software Focus (CE) Diploma General Machinist - Certificate Agriculture Management & Production (AAS) B with focus in Agribusiness with focus in Agronomy with focus in Diversified Agriculture Psychology (AA)B/L/M Residential Design Focus (CE) Technical Skills Instructor (AOS). L/M Intro to Design Software (CE) Ag- Horticulture & Turfgrass Management (AAS)... B Ag- Livestock Management & Production (AAS).... B Diploma Truck Maintenance & Light Repair (CE) Ag- Precision Agriculture B Diploma Certificate Certificate.....B/L Associate of Applied Science Ag- Fundamentals of Ag (CE)B/O Diploma Truck Maintenance & Light Repair (CE) Agricultural Teacher Education (AAS)..... B Dietary Manager (CE) 0 Alcohol & Drug Counseling (CE).....L Early Childhood Education L/O* Associate of Applied Science Associate of Arts - For transfer to a **ASSOCIATE OF HEALTH SCIENCES** To help us provide focused advising, please select your career interest area from the list below. 4-year institution Diploma Certificate In-Home Care Provider Option (CE) Infant/Toddler Option (CE) Preschool Option (CE) Peer Support (CE). L Pharmacy Technician (DI). L/0* Physical Therapist Assistant (AAS). L Polysomnographic Technology (CE). O*(L) Practical Nursing (DI). B/L/M Radiologic Technology (AAS). L/0* Respiratory Care (AAS). L/0* Surgical First Assist (CE). L/0* Surgical Technology (AAS). L/0* **Locations Offered** Technician (___ AAS, ___ CE) **Beatrice Campus** L = Lincoln Campus Milford Campus Entire program available online Certificate Program offers Web-based courses but requires supervised clinicals/practicums/labs at Electronic Systems TechnologyL _____ AVD/Low Voltage Technician (____ AAS, ___ CE) _____ Electronic Systems Technician (____ AAS, ___ DI, ___ CE) identified locations. I am undecided which SCC Health Science program I am interested in. Please note: Online courses may require proctored exams. Any cost for the proctor is incurred at the student's expense. Testing Centers located on each SCC Campus and Learning Center will proctor SCC exams at no charge to the student. I am interested in transferring prerequisite coursework toward a health program at another institution. Diploma Certificate Career goal **Degrees/Awards Offered** Associate of Arts (AA) Associate of Science (AS) Auto Collision Repair Technology (AAS) M Geographic Information Systems Technician 0 Automotive Technology.....L/M ____ Associate of Applied Science (Full Time) ___ Associate of Applied Science (Part Time) Associate of Applied Science (AAS) Associate of Occupational Studies (AOS) Associate of Applied Science Diploma Certificate Diploma (DI) Diploma Certificate (CE) Automotive Technology & Light Repair (CE) Graphic Design|Media Arts (AAS)L Baking/Pastry.....L ____ Associate of Science ____ Diploma `This program leads to licensure or certification, refer Heating, Ventilation, Air Conditioning to the program's webpage for information on states and territories where this program does and does not meet requirements. For more information, contact the program director. Diploma Healthcare Management (AAS)B/L/M ____ General Focus If you have questions please contact the Admissions Office at 402.437.2600 or admissions@southeast.edu Certificate Medical Assisting Focus Pharmacy Technician Focus Practical Nursing Focus Please visit your program of study's website for information related to topics that include, but are Healthcare Services (CE)B/L/M not limited to accreditation, state licensure or certification, or other disclosures. SCC strives to Integrated Technologies (AAS).....B/L/M/O Business.....B/L/M/O promote transparency and encourages students to John Deere Construction Associate of Applied Science review the information carefully. Associate of Applied Science Associate of Arts - For transfer to a 4-year institution Reasonable Accommodations for persons with John Deere Tech (AAS) M **disabilities:** SCC provides reasonable accommodations for students with disabilities to ensure access Bookkeeping (DI) Business General (_ Client Relations (CE) for students with disabilities to ensure access to educational programs and services. Students who are requesting an accommodation based on a documented disability are advised to make the request known as soon as possible to determine eligibility and ensure timely service. For information on requesting ADA reasonable accommodations, contact the Career Advising Office on the campus you plan to attend ^Long Term Care Administration..... O* (L) Entrepreneurship (CE) Event Venue & Operations Management (CE) Associate of Applied Science Certificate Computer Information Technology Appucations Development (____AAS,___DI) Cybersecurity (AAS) Network Management (___ Manufacturing Engineering Technology M ____ Associate of Applied Science Diploma Certificate AAS. DI) plan to attend. General Technician (CE) Medical Assisting (DI).....L **Financial Aid at Southeast Community College:** SCC requires completion of the Free Application for Concrete Construction Technician M Microsoft Office Specialist (CE) L/O Federal Student Aid (FAFSA) to determine eligibility for federal financial aid, i.e., grants, loans and work study. Associate of Applied Science Diploma Certificate Students must be accepted into an eligible Program of Study to receive financial aid. Please contact the Financial Aid Office with questions. Criminal JusticeB/L/O Associate of Applied Science Associate of Arts - For transfer to a 4-year institution Certificate SCC is an equal opportunity educator and employer. Operations & Service Management (AAS)...B/L/M/O SCC es un patrono con Igualdad de Oportunidades en Adult & Juvenile Services & Corrections (AAS).. L Plumbing, Heating, and Air Conditioning (AAS).... M el Empleo y la Educación. Law Enforcement & Homeland Security (AAS)... L

CERTIFICATION AND SIGNATURE

Applicant's Signature

SCC ACADEMIC PROGRAMS

Age Qualification: By signing this application, I certify I will be at least 16 years of age on the date of my expected enrollment at Southeast Community College. If I am applying for the Professional Truck Driver Training program, I certify I will be at least 18 years of age on the date of my expected enrollment.

Certificate of Application: I hereby certify that 1) I understand that this Application for Admission is considered an educational record protected by SCC's policies and privacy statements located at southeast.edu/footer/privacy-statement.php, 2) I understand that the information provided may be used to tailor web page content or communication, including email, text, and phone calls, to my specific needs or interests, and 3) I certify that all of the information submitted in this Application for Admission is voluntarily submitted and honestly presented. I understand that I may be subject to a range of possible disciplinary actions, including admission revocation or expulsion, should the information I certify is found to be false. Your signature is your confirmation that the application you have filled out is your own work and the information is factually true.

Date: