

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 [Visiting Student Application](#) at www.southeast.edu/applynow.

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.)

FOR OFFICE USE ONLY:

Application received _____

PERSONAL INFORMATION

Full legal name: _____

FIRSTMIDDLELAST

OTHER LAST NAME(S) (INCLUDING BIRTH NAME, MAIDEN NAME, ETC.)

CHOSEN FIRST NAME (IF DIFFERENT THAN LEGAL FIRST NAME)

Are you an international student who will be requesting an I-20 from SCC for an F1 Visa?

☐ Yes☐ No

Current mailing address _____

STREET/P.O. BOX #CITYSTATEZIPNEBRASKA COUNTY NUMBER OR NAME

Permanent mailing address _____

(IF DIFFERENT FROM ABOVE)STREET/P.O. BOX #CITYSTATEZIPNEBRASKA COUNTY NUMBER OR NAME

Cell phone: (_____) _____ - _____

Alternate phone: (_____) _____ - _____

By submitting your cell phone number, you agree to receive enrollment related text messages from SCC Admissions, Advising, Financial Aid, and Registration, up to approximately 6 messages/month. Message & data rates may apply. You can opt out at any time by texting back: Unsubscribe, Stop, Cancel, End, Quit. All information is protected by <https://www.southeast.edu/legalnotices> SCC's Website Privacy Statement. Reminder, never include personal information such as SSN, driver's license #, credit card #, etc. in text replies.

Social Security #: _____ - _____ - _____ (as printed on your Social Security card)

Date of birth _____ / _____ / _____

*Sex assigned at birth: ☐ Male☐ Female

Ethnicity (select one): ☐ Hispanic or Latino☐ Not Hispanic or Latino

*Race (select one or more): ☐ American Indian or Alaska Native☐ Asian☐ White☐ Black or African American☐ Native Hawaiian or Other Pacific Islander

Personal Email (Please do not use a school affiliated email address): _____

(The College routinely communicates important information to students via email.)

*Recorded for Department of Education reporting needs

EMERGENCY CONTACT INFORMATION

Person to contact in case of emergency: _____

NAMERELATIONSHIP TO APPLICANTAREA CODE AND PHONE #

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 FERPA section in the College Catalog for more information). This information may be the same or different from your Emergency Contact.

Name: _____

Email Address: _____

Mailing Address _____

STREET/P.O. BOX #CITYSTATEZIP

Relationship: ☐ Parent☐ Guardian☐ Spouse☐ Other (Please Indicate): _____

MILITARY EXPERIENCE

Are you planning to use G.I. Bill Benefits? ☐ Yes☐ No

If you are planning to use military educational benefits, please contact the SCC Veterans Services Specialist at militarybenefits@southeast.edu

EDUCATIONAL HISTORY

What is the highest school your parent 1/guardian completed? ☐ Middle/Jr. 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/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 program

NAME OF SCHOOLCITYSTATE

Month: _____ Year: _____

☐ Completed 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)

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 term:

☐ Summer 2025☐ Fall 2025☐ Spring 2026☐ Summer 2026☐ Fall 2026☐ Spring 2027☐ Summer 2027☐ Fall 2027

STUDENT STATUS

I am a: ☐ New student☐ Former student☐ Transfer student☐ Current SCC student

I 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 location

☐ 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)	
Academic Transfer (AS)	B/L/M/O
Examples: agriculture, computer science, engineering, science, or mathematics (transfer to 4-year institution)	
Accounting (AA)	B/L/M/O
- For transfer to a 4-year institution	
Agriculture Management & Production (AAS)	B
_____ with focus in Agribusiness	
_____ with focus in Agronomy	
_____ with focus in Diversified Agriculture	
Ag- Horticulture and Turfgrass Management (AAS) ...	B
Ag- Livestock Management & Production (AAS)	B
Ag- Precision Agriculture	B
_____ Diploma	
_____ Certificate	
Ag- Fundamentals of Ag (CE)	B/O
Agricultural Teacher Education (AAS)	B
Alcohol & Drug Counseling (CE)	L

To help us provide focused advising, please select your career interest area from the list below.

Career goal _____

- Auto Collision Repair Technology (AAS) L/M**
Automotive Technology L/M
 ___ Associate of Applied Science (Full Time)
 ___ Associate of Applied Science (Part Time)
 ___ Diploma
 ___ Automotive Technology & Light Repair (CE)
Baking/Pastry L
 ___ Associate of Science
 ___ Diploma
Biotechnology B/L
 ___ Associate of Science
 ___ Diploma
 ___ Certificate
Building Construction Technology M
 ___ Associate of Applied Science
 ___ Carpentry & Cabinetmaking Construction (CE)
 ___ Construction Process (CE)
Business B/L/M/O
 ___ Associate of Applied Science
 ___ Associate of Arts - For transfer to a
 4-year institution
 ___ Bookkeeping (DI)
 ___ Business General (___ DI, ___ CE)
 ___ Client Relations (CE)
 ___ Entrepreneurship (CE)
 ___ Event Venue & Operations Management (CE)
Computer Information Technology L
 ___ Applications Development (___ AAS, ___ DI)
 ___ Computer Support (___ AAS, ___ DI)
 ___ Cybersecurity (AAS)
 ___ Network Management (___ AAS, ___ DI)
 ___ General Technician (CE)
Concrete Construction Technician M
 ___ Associate of Applied Science
 ___ Diploma
 ___ Certificate
Criminal Justice B/L/O
 ___ Associate of Applied Science
 ___ Associate of Arts - For transfer to a
 4-year institution
 ___ Adult & Juvenile Services & Corrections (AAS) . . . L
 ___ Law Enforcement & Homeland Security (AAS) . . .

- | | | |
|-------|---|--------------|
| _____ | Powersports Technology | M |
| _____ | Associate of Applied Science | |
| _____ | Diploma | |
| _____ | Precision Machining & Automation Technology | M |
| _____ | Advanced CNC & Automation - AAS | |
| _____ | Tool Maker Mold & Die - AAS | |
| _____ | Diploma | |
| _____ | General Machinist - Certificate | |
| _____ | Professional Truck Driver Training (CE) | M |
| _____ | Psychology (AA) | B/L/M |
| _____ | Technical Skills Instructor (AOS) | L/M |
| _____ | Water Quality & Wastewater Treatment Operator (CE) | M |
| _____ | Welding Technology (____ day ____ evening) | B/L |
| _____ | Associate of Applied Science | L |
| _____ | Diploma | L |
| _____ | Certificate | B/L |

B = Beatrice Campus
L = Lincoln Campus
M = Milford Campus
O = Entire program available online
O* = Program offers Web-based courses but requires supervised clinicals/practicums/labs at identified locations.

SCC is an equal opportunity educator and employer.
SCC es un patrono con Igualdad de Oportunidades en
el Empleo y la Educación.

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: _____