



ESTHETICIAN (650 HOURS)

Full-time Part-time

This application is for the Esthetician program only. If you decide to enroll at JCCC prior to program acceptance, you must complete a general application for admission.

When will you enter JCCC? Fall Spring Summer

Personal Data (please print - black ink only - no pencil)

**Social Security No. B&G exp. date (for seniors over 55)

Last Name First Name Middle

Maiden/other names Suffix (Jr, III, Sr.)

Number Street Name (Do NOT abbreviate) Apartment Number, P.O. Box, Rural Route (if necessary) P.O. Box will result in out-of-state tuition if you do not give a Kansas residency address too.

City State ZIP

Day Phone No. Evening Phone No. TDD (for hearing impaired)

Preferred E-Mail Address:

Sex M F Date of birth Are you a U.S. citizen? Yes No If "no," are you a resident alien? Yes No

Country of birth (You MUST bring your resident alien card to the 2nd floor, Student Center before enrollment.)

Students on any type of VISA - STOP HERE. Contact the Intercultural Center office at www.jccc.edu for an Application for Immigrants and Non-Immigrants.

*Ethnic code: Asian or Pacific (01) Am. Indian/Alaskan Native (02) African-American/Black (03) Hispanic (04) Caucasian/White (05) Other (06)

Kansas Residency Information (This section must be completed in its entirety or you will be charged out-of-state tuition.)

Are you living in Kansas? Yes No If "yes," please provide the following information. If "no," proceed to back page.

1. On what date did your residence in Kansas begin? Since birth Since

2. In what Kansas county do you currently live? Johnson Other

3. Have you lived at this address for at least six months? Yes No If "no," when did you move to this address?

4. If you have lived at this address less than six months, what was your previous address? Number Street Name (Do NOT abbreviate)

City State ZIP

County When did you move to this address? M M Y Y

5. Are you a full-time employee of JCCC? Yes No A part-time employee of JCCC? Yes No Or dependent of a full-time employee at JCCC? Yes No

6. If you are under the age of 24, are you listed as a dependent on your parent's tax return? Yes No

7. If yes, what is their address?

Number Street Name (Do NOT abbreviate)

City State ZIP

County When did your parents move to this address? M M Y Y

For office use only
Degree VC/Esthetics
3720
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GED/Hst

JCCC Rec'd Stamp

