



Please return completed application for the UCC Automotive Program in one of the following ways.

1. Return to the Automotive Department in Lockwood Hall at UCC Monday thru Thursday, 8:00 a.m. – 1:00 p.m. (541 440-7782)
2. Mail to:
UCC Admissions Automotive Application P.O. Box 967 Roseburg, OR 97470
3. E-mail to john.blakely@umpqua.edu
4. Fax to 1877 538-5611

Please enclose with application the following:

1. A current DMV copy of your driving record (can be faxed to 1877 538-5611 from DMV).
2. A copy of your placement test scores and or transcript.
3. Your student ID # (800#####)



Please type or print neatly in blue or black ink.

"Providing your social security number is voluntary. If you provide it, the college will use your social security number for keeping records, doing research, aggregate reporting, extending credit and collecting debts and providing the Internal Revenue Service with the information required under the Taxpayer Relief Act of 1997. Your SSN will not be given to the general public. If you choose not to provide your SSN, you will not be denied any rights as a student. Please refer to the disclosure statement in the college catalog and schedule of classes. However, providing your SSN is required to receive Federal Financial Aid." "Ethnic data information is required for institutional compliance with the Civil Rights Act of 1964. Your cooperation is appreciated." Applicant Demographics: for information only.

Last Name		First Name	Middle Initial	Previous Last Name(s)	
Social Security Number		Date of birth (mm/dd/yy)		Male	Female
Current mailing address number and street			City	State	Zip
Physical address if different from mailing address			City	State	Zip
Daytime phone	Evening phone		Message/Cell phone		

Email address

Placement Test Requirements: All Automotive students need to meet the minimum placement test score to be considered for acceptance in the UCC Automotive Certificate, A.A.S. Degree, and Toyota T-Ten Program. The following scores are required by applicants: Reading 80 (RD80) or Higher; Writing 90 (WR90) or Higher; Math Skills (MTH 010) or Higher; or Instructor approval for ALL First Year Courses. If a student does not test at the appropriate level they must either: get approved into the class by passing the interview process with Department Staff, or retest at the appropriate level. Any students who take a placement test and scores below the minimum can retest, or work with the Developmental Education Program to enhance their skills and re-apply for the Automotive Program.

DRUG SCREENING STATEMENT: All Automotive students will be required to have drug screening upon admission to the automotive programs. Additionally, any student suspected of being under the influence of alcohol or drugs will be required to submit to an immediate substance screening, as a condition of remaining in the program. As outlined in UCC's Student Code of Conduct 721.3. UCC's Automotive Department will designate which company will conduct the drug screen testing. The Automotive Department will not accept drug screening results from any company other than the one designated by the Department without a Memorandum of Understanding in place. In accordance with industry standards the Automotive Program maintains a no tolerance policy regarding substance abuse. As outlined in UCC's Student Code of Conduct 721.3.

Driver's License and Driving Record: All Automotive students will provide copy of current Driver's License and Driving record report from DMV as part of the program requirements.

Student Success Consent: All applicants will consent to participate in a Student Success mediation process of attending tutoring sessions throughout the program to facilitate success in the Automotive Degree and Certification and T-Ten program.

Automotive Orientation Day: All applicants will attend the Automotive Orientation and Interview process when notified of Dates and Times.

I have read and understand the admission criteria for the Automotive Program at Umpqua Community College. I understand that it is my responsibility to meet all program and application criteria as stated in the UCC catalog. I verify that all statements on this application are complete and true and I understand that falsification of any information may lead to disqualification or dismissal from the program. I give my permission for release of pertinent application information to the Industry Partners who require it for CWE, including Toyota Motor Corporation, as necessary to facilitate my program of study.

Signature

Date

**MAIL TO: UCC ADMISSIONS AUTOMOTIVE APPLICATION
P.O. BOX 967
ROSEBURG OR 97470**

Received Date: _____

Initial _____



Umpqua Community College

Application for Admission

Office Use ONLY	
<input type="checkbox"/> Admissions	<input type="checkbox"/> Returning Student
<input type="checkbox"/> College Transcript	

Disclosure Statement: "Providing your social security number is voluntary. If you provide it, the college will use your Social Security number for keeping records, doing research, aggregate reporting, extending credit and collecting debts Your SSN will not be given to the general public. If you choose not to provide your SSN, you will not be denied any rights as a student. Please refer to the disclosure statement in the college catalog and schedule of classes which describes how your number will be used. Providing your social security number means that you consent to use of the number in the manner described."

Fall 20____ Winter 20____ Spring 20____ Summer 20____

Student Information

Social Security Number: _____ - _____ - _____ Date of Birth: (month/day/year) ____/____/____

Last Name: _____ First Name: _____ M.I. _____ Maiden Name: _____

Current Mailing Address: _____
 Number & Street/PO Box City County State Zip/Postal Code

Home Phone: (____) _____ Work / Cell Phone: (____) _____

E-mail: _____

Previous Home Address: _____
 (If at present address less than 90 days) Number & Street/PO Box City County State Zip/Postal Code

General Information

Citizenship: USA Other* Country of citizenship: _____ *(International Student Yes No)

Gender: (optional) Male Female

Race/Ethnicity: (optional) Caucasian Black Hispanic American Indian Asian Other _____

Are you a U.S. veteran? Yes No Will you receive veteran benefits? Yes No

Did your parent(s) (natural or adopted) receive a Bachelor's Degree from a 4-year college/university? Yes No

High School Information

Check one and provide date of completion/or Expected date of Completion: HS Diploma GED Adult HS Diploma

Date Completed: (month/day/year) ____/____/____

School attended or currently attending _____: City _____ State _____

Enrollment Information

Enrollment Status: (check one): Enrolling at UCC for the first time Returning student (absent for more than one full year) Approx. term of last attendance ____/____/____

College background: Please list ALL colleges and universities attended.

Official college transcripts should be requested from each school and sent to Umpqua Community College.

College/University Name	City & State	Dates Attended

What is your goal at UCC?

- 1. Two year program
- 2. Certificate
- 3. Job Preparation
- 4. Skill Improvement
- 5. Transfer to 2-year school
- 6. Transfer to 4-year school
- 7. Personal Interest
- 8. Adult High School diploma

What is the highest degree you have attained beyond high school?

- 1. Some college credits
- 0. None
- 2. Certificate
- 3. Associates Degree
- 4. Bachelor's Degree
- 5. Master's Degree
- 6. PhD/Professional

Affirmative Action: It is the policy of Umpqua Community College to provide equal educational and employment opportunities and to provide service benefits to all students and employees without regard to sex, race, color, religion, national or ethnic origin, age, sexual orientation, marital status, disability or any other status or characteristic protected by applicable state or federal law. This policy is in accordance with the laws enforced by the Department of Education and Department of Labor, including Presidential Executive Order 11246, as amended by the Civil Rights Act of 1991, Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Acts of 1974-75, the Americans with Disabilities Act of 1990 and Oregon Revised Statute 659.030. Inquiries regarding application of these and other regulations should be directed to the College's Human Resources Office 541-440-4626, the Office of the Vice President for Administrative Services 541-440-4631; the Office of Civil Rights, Department of Education Office, Seattle, Washington; or the Office of Federal Contract Compliance Programs, Department of Labor, San Francisco, California.

By signing this form, certify that the information on this form is correct and I understand that if it is later found otherwise, it is sufficient cause for rejection or dismissal. I authorize the use of my social security number as my student identification number and in follow-up studies.

Signature _____

Date _____