

BOSSIER PARISH COMMUNITY COLLEGE

EDUCATIONAL PROGRAMS

ASSOCIATE DEGREES

Arts - Louisiana Transfer

Business Administration
(Accelerated Courses Available)

Care & Development of Young Children

Computer Information Systems

Construction Technology & Management

Criminal Justice (2 Areas of Study)

- General Criminal Justice
- Medicolegal Death Investigation

EMT Paramedic

General Science (2 Areas of Study)

- Allied Health
- Natural Science

General Studies

Health Care Management
(Accelerated Courses Available)

Information Network Security Specialist
(Accelerated Courses Available)

Information Network Specialist

Information Programmer-Analyst

Information Systems Administration
Specialist

Medical Assistant

Music

Nursing

Occupational Therapy Assistant

Oil and Gas Production Technology

Pharmacy Technician

Physical Therapist Assistant

Science - Louisiana Transfer

Respiratory Therapy

Teaching (grades 1-5)

Telecommunications
(12 Areas of Study)

- Broadcasting
- Business of Music
- Computer Animation
- Digital Media Studies
(Accelerated Courses Available)
- Film

ASSOCIATE DEGREES CONTINUED

Telecommunications Continued

- Fine Art Photography
- Graphic Design
- Media for the Ministry
- Photography
- Radio
- Sound Recording Technology
- TV Production

Theatre

Web Analyst Programmer

CERTIFICATE PROGRAMS

Construction Technology

Culinary Arts

General Studies

Help Desk Support
(Accelerated Courses Available)

Industrial Control Systems

Legal Secretary

Music

Oil and Gas Production Technology

Pharmacy Technician

Phlebotomy

Telecommunications
(12 Areas of Study)

- Broadcasting
- Business of Music
- Computer Animation
- Digital Media Studies
(Accelerated Courses Available)
- Film
- Fine Art Photography
- Graphic Design
- Media for the Ministry
- Photography
- Radio
- Sound Recording Technology
- TV Production

Theatre

TECHNICAL DIPLOMA PROGRAMS

Medical Office Specialist
(2 Areas of Study)

- Coding
- Transcription

Surgical Technology

TECHNICAL COMPETENCY AREAS

(Financial aid is not available for these programs)

Acting

Basic Management

Biotechnology

Bookkeeping

Broadcasting

Business Communications

Business of Music

Computer Animation

Computer Drafting and Design

Costume Design

Directing

ECG/Telemetry Technician

EMT Basic

Film

Graphic Design

Laboratory Assistant

Lighting Design

Manufacturing Technology

Media for the Ministry

Medical Transcription

Medical Unit Coordinator

Photography

Radio

Respiratory Therapy

Scene Design

Software Applications

Sound Recording Technology

Stage or Theatre Management

TV Production

Theatre Technician

Web Design

BOSSIER PARISH COMMUNITY COLLEGE

6220 East Texas Street

Bossier City, LA 71111

Phone: 318-678-6000

APPLICATION FOR ADMISSION

SOCIAL SECURITY NUMBER									



APPLICATION DATE	
PLANNED ENROLLMENT	
<input type="checkbox"/> Spring ____	<input type="checkbox"/> Fall ____
<input type="checkbox"/> Summer ____	<input type="checkbox"/> Summer Only ____

www.bpcc.edu

New Student Former Student

Date of last attendance: Fall ____ Year ____ Spring ____ Year ____ Summer ____ Year ____

One Time, Non-Refundable Application Fee: U.S. - \$15.00 International Student - \$25.00 Remit Check or Money Order

LEGAL NAME	Last _____ First _____
<input type="checkbox"/> Dr. <input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs.	Middle _____ Suffix _____ Nickname _____
	Prior/Maiden names _____

MAILING ADDRESS			
CITY, STATE ZIP			
HOME PHONE	WORK PHONE	CELL PHONE	

EMAIL ADDRESS		<input type="checkbox"/> Personal <input type="checkbox"/> Business <input type="checkbox"/> Other
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DATE OF BIRTH		GENDER	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
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EMERGENCY CONTACT			
MAILING ADDRESS			
CITY, STATE ZIP			

FAMILY EDUCATION	Did your mother, father, grandparents, or legal guardians ever attend college? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Please indicate the highest level of education attained by your mother _____,
	father _____, grandmother _____,
	grandfather _____, or legal guardians _____.

VETERAN OR MILITARY STATUS	Are you a member of the Armed Forces? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Are you a veteran of the U.S. Armed Forces? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Are you a dependent of a Service Member? <input type="checkbox"/> Yes <input type="checkbox"/> No

MARITAL STATUS	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> Other
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CITIZENSHIP	Are you a citizen of the United States of America? <input type="checkbox"/> Yes <input type="checkbox"/> No
	If no, what is your current status in the United States? _____
	Visa Type: <input type="checkbox"/> Temporary Alien <input type="checkbox"/> J-1 <input type="checkbox"/> Other _____

Ethnic origin information is used for federal and state reporting ONLY. It is not used in consideration for admission purposes.

ETHNIC ORIGIN	<input type="checkbox"/> American Indian or Alaska Native	<input type="checkbox"/> Hispanic/Latino	<input type="checkbox"/> Native Hawaiian or Other Pacific Islander
	<input type="checkbox"/> Asian	<input type="checkbox"/> White	<input type="checkbox"/> Non-Resident Alien
	<input type="checkbox"/> Black or African American	<input type="checkbox"/> Two or more races	<input type="checkbox"/> Race and ethnicity unknown

MAJOR		AREA OF STUDY	
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CALL ACCELERATED	<input type="checkbox"/> Yes (limited to programs identified as accelerated) <input type="checkbox"/> No
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RESIDENCY	Are you a resident of Louisiana? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, how long? _____ Years _____ Months
	Are you a dependent of your parents? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
	Do they presently live in Louisiana? <input type="checkbox"/> Yes <input type="checkbox"/> No	
	If yes, Parent's Name _____ Parent's Address _____	

ACT/SAT SCORES

Have you taken the ACT/SAT? Yes (Your test scores must be sent to the college for placement purposes.)
 No (You need to sign up for the placement test.)

HIGH SCHOOL DIPLOMA

Have you earned a General Equivalency Diploma/GED? Yes No If yes, date: _____
 What level of high school education have you earned? high school diploma certificate of achievement (Ability to Benefit Test required.)
 High School Name _____ Grad. Date _____
 Address _____ City, State ZIP _____

POST SECONDARY EDUCATION

Have you attended or enrolled in any proprietary school, college, university or technical college since leaving high school? Yes No
 Including BPCC, list all institutions attended by name (proprietary school, colleges, universities, technical colleges).
Transcripts from colleges and universities (except vocational, technical, or proprietary schools) are required for analysis before admission can be completed. Official transcripts must be sent from the institution granting the credit directly to Bossier Parish Community College - Admissions/Registrar's Office. Please list additional institutions on another page and attach.

EDUCATION TO DATE

COLLEGE/UNIVERSITY	CITY & STATE	FROM: MM/YYYY	TO: MM/YYYY	HOURS EARNED	DEGREE/CREDENTIAL EARNED	LAST DATE OF ATTENDANCE

SUSPENSION

Have you ever been suspended/dismissed from a college/university for academic or discipline reasons? Yes No
 Are you currently on suspension from any college or university?
 (Failure to answer this question prohibits enrollment at BPCC) Yes No

NON-CREDIT BPCC

Have you ever taken a non-credit class at BPCC? Yes No

DUAL/CONCURRENT ENROLLMENT

Are you a college student enrolled at another LCTCS college and are dually enrolling?
 (i.e. applying for courses at more than one college/university for the same semester/term) Yes No
 Will you be enrolled in a college or university outside of the LCTCS colleges and therefore cross/concurrently enrolling? Yes No

LEGAL CERTIFICATION

All of the above statements are true to the best of my knowledge, and all information furnished on this form is complete and accurate. I understand that **withholding information** or **giving false information** will make me **ineligible for admission and enrollment** at Bossier Parish Community College. I further understand that it is my responsibility to have all required records mailed directly to the Office of the Registrar from the respective high school or college(s) on or before the specified deadline listed in the current class schedule. I understand that my registration will be canceled and I will be dropped from the rolls of Bossier Parish Community College without appeal if my records do not meet requirements for admission. I further understand that readmission to the college will be denied and official transcripts will not be printed if my records are not filed in the office by this date. Should either situation occur and I am not accepted at Bossier Parish Community College, I understand NO REFUND OF FEES will be given. I do hereby authorize Louisiana public postsecondary education access to my academic records.

Signature: _____ Date: _____

STUDENTS WITH DISABILITIES

Students with disabilities should contact the **Disability Services (F-250)**, Phone: **(318) 678-6315**, as soon as possible after submitting their application. Arrangements must be made prior to registration.

Counseling Center, 6220 East Texas Street
 Bossier City, LA 71111 - Phone (318) 678-6315,

Bossier Parish Community College does not discriminate on the basis of race, color, national origin, gender, age, religion, qualified disability, marital status, veteran's status, or sexual orientation in admission to its programs, services, or activities, in access to them, in treatment of individuals, or in any aspect of their operations. Bossier Parish Community College does not discriminate in its hiring or employment practices.