



Undergraduate Admission Application

General Information (PLEASE PRINT)

LAST NAME		FIRST NAME		MIDDLE INITIAL	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
BIRTH NAME (IF DIFFERENT FROM ABOVE)				DATE OF BIRTH (MM/DD/YY)	
HOME PHONE (WITH AREA CODE)		WORK PHONE (WITH AREA CODE)		CELL PHONE (WITH AREA CODE)	
PERMANENT ADDRESS					
CITY		STATE		ZIP	COUNTY
ALTERNATE MAILING ADDRESS (REQUIRED FOR STUDENTS WITH P.O. BOXES ONLY)					
CITY		STATE		ZIP	COUNTY
SOCIAL SECURITY NUMBER			E-MAIL		

Citizenship / Ethnic / Racial Group (PLEASE PRINT)

1. ARE YOU A U.S. CITIZEN? <input type="checkbox"/> YES (IF YES, GO TO QUESTION 3) <input type="checkbox"/> NO (IF NO, GO TO QUESTION 2)		2. PLEASE SPECIFY COUNTRY OF CITIZENSHIP.		VISA TYPE	BIRTH COUNTRY
		ARE YOU A NON-RESIDENT ALIEN? <input type="checkbox"/> YES (IF YES, GO TO ENROLLMENT INFORMATION) <input type="checkbox"/> NO (IF NO, GO TO QUESTION 3)			
NOTE: IN COMPLIANCE WITH FEDERAL REPORTING REQUIREMENTS, BAKER COLLEGE MUST SEEK TO IDENTIFY THE ETHNIC/RACIAL BACKGROUND OF APPLICANTS FOR ADMISSIONS. YOU ARE ENCOURAGED TO SUPPLY THIS INFORMATION BUT MAY DECLINE WITHOUT IN ANY WAY PREJUDICING YOUR APPLICATION.					
3. PLEASE CHECK ONE BOX TO INDICATE THE RACE GROUP WHICH YOU THINK BEST APPLIES TO YOU.					
<input type="checkbox"/> HISPANICS OF ANY RACE					
FOR NON-HISPANICS ONLY					
<input type="checkbox"/> AMERICAN INDIAN OR ALASKA NATIVE		<input type="checkbox"/> ASIAN		<input type="checkbox"/> BLACK OR AFRICAN AMERICAN	
<input type="checkbox"/> NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER		<input type="checkbox"/> WHITE		<input type="checkbox"/> TWO OR MORE RACES	
<input type="checkbox"/> RACE AND ETHNICITY UNKNOWN					
NOTE: IF YOU LEAVE THE PREVIOUS QUESTION BLANK, A RACE WILL BE SELECTED FOR YOU TO SATISFY FEDERAL REPORTING REQUIREMENTS.					

Enrollment Information (PLEASE PRINT)

SELECT CAMPUS LOCATION		<input type="checkbox"/> ALLEN PARK	<input type="checkbox"/> AUTO/DIESEL INSTITUTE	<input type="checkbox"/> CADILLAC	<input type="checkbox"/> CLINTON TOWNSHIP	<input type="checkbox"/> FLINT	<input type="checkbox"/> MUSKEGON	<input type="checkbox"/> PORT HURON
		<input type="checkbox"/> AUBURN HILLS	<input type="checkbox"/> BAKER ONLINE	<input type="checkbox"/> CASS CITY	<input type="checkbox"/> CULINARY INSTITUTE	<input type="checkbox"/> JACKSON	<input type="checkbox"/> OWOSSO	
SELECT EXTENSION SITE LOCATION		<input type="checkbox"/> COLDWATER	<input type="checkbox"/> FREMONT	<input type="checkbox"/> SANDUSKY	<input type="checkbox"/> WEST BRANCH			
HAVE YOU ATTENDED BAKER COLLEGE BEFORE?		<input type="checkbox"/> YES	IF YES, WHEN? (PLEASE SPECIFY)					
		<input type="checkbox"/> NO						
I PLAN TO ENTER (PLEASE PRINT THE YEAR) 20 _____		<input type="checkbox"/> FALL (SEPTEMBER) <input type="checkbox"/> WINTER (JANUARY) <input type="checkbox"/> SPRING (APRIL) <input type="checkbox"/> SUMMER (JUNE)						
I PLAN TO ATTEND		<input type="checkbox"/> DAY CLASSES <input type="checkbox"/> EVENING CLASSES			STUDENT CLASSIFICATION (CHECK ONE) <input type="checkbox"/> FULL-TIME <input type="checkbox"/> PART-TIME			
I AM ENROLLING IN		<input type="checkbox"/> ONE CLASS ONLY <input type="checkbox"/> CERTIFICATE PROGRAM <input type="checkbox"/> ASSOCIATE DEGREE <input type="checkbox"/> BACHELOR DEGREE <input type="checkbox"/> BACHELOR / 5-YEAR MBA						
PROGRAM OF INTEREST / MAJOR								
DO YOU PLAN ON LIVING IN BAKER COLLEGE HOUSING?		<input type="checkbox"/> YES (IF YES, A RESIDENCE HALL APPLICATION MUST BE COMPLETED)					HOUSING IS AVAILABLE AT THE FOLLOWING CAMPUS LOCATIONS: AUTO/DIESEL INSTITUTE, CULINARY INSTITUTE, FLINT, MUSKEGON, AND OWOSSO	
		<input type="checkbox"/> NO						

BE SURE TO COMPLETE AND SIGN THE BACK OF THIS APPLICATION





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Educational Background (PLEASE PRINT)

DID YOU GRADUATE FROM HIGH SCHOOL? YES NO DID YOU RECEIVE A HIGH SCHOOL DIPLOMA OR A CERTIFICATE OF COMPLETION? DIPLOMA CERTIFICATE

NAME OF HIGH SCHOOL / GED	DATE OF ATTENDANCE	MONTH / YEAR OF GRADUATION
_____	_____	_____
_____	_____	_____
NAME OF COLLEGE(S)	DATE OF ATTENDANCE	MONTH / YEAR OF GRADUATION
_____	_____	_____
_____	_____	_____
_____	_____	_____

Military Information

ARE YOU NOW, OR HAVE YOU EVER BEEN, A MEMBER OF THE ARMED SERVICES? YES NO IF YES, DO YOU PLAN ON USING ANY FORM OF MILITARY EDUCATIONAL BENEFITS TO HELP FUND YOUR EDUCATION? YES NO

Baker College is a participant in the Yellow Ribbon program.

Financial Aid Information

All students wishing to apply for Financial Aid with Baker College should complete the Free Application for Federal Student Aid (FAFSA). These forms are available at Baker College (or apply online at www.fafsa.ed.gov).

Baker College should be listed first under "What college(s) do you plan to attend in the next school year".

Students experiencing difficulty obtaining or completing the form should not hesitate to contact any Baker College Financial Aid or Admissions office for assistance.

Background Check Waiver

HAVE YOU EVER BEEN CONVICTED OF A MISDEMEANOR? YES NO DO YOU HAVE ANY CRIMINAL CHARGES PENDING? YES NO

HAVE YOU EVER BEEN CONVICTED OF A FELONY? YES NO

I understand that I may be required to undergo and pay for criminal and/or other background checks and drug testing in order to enter and participate in certain programs. I understand that any felony, misdemeanor, or recorded event may prevent me from entering or completing certain programs; entering required clinical, externship, internship, practicum, or student teaching placements; or obtaining future employment, certification, or licensure. I understand and agree that background checks and drug testing reports that are done may be released to affiliated facilities participating with the College as part of my education.

Parent and/or Legal Guardian (FOR DEPENDENT STUDENTS, PLEASE PRINT)

LAST NAME	FIRST NAME	RELATIONSHIP TO APPLICANT
ADDRESS (IF DIFFERENT FROM YOUR OWN)		
CITY	STATE	ZIP
E-MAIL ADDRESS	TELEPHONE NUMBER (WITH AREA CODE)	

Applicant Signature

An application fee of \$20.00 is enclosed to process this application. I understand that this fee will not be returned unless this application is not accepted. I give Baker College my permission to obtain a copy of my high school transcript. I hereby affirm that the above information is correct and true. I understand that any misrepresentation of this information will be cause for immediate disciplinary action which may include expulsion from the college.

STUDENT SIGNATURE	DATE
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College Use Only

APPLICATION FEE PAID \$ _____ DATE _____ QUARTER _____ RECEIPT NO. _____ INITIALS _____