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EmplID _____
IS OS _____
Staff Initial _____
Date _____

## APPLICATION FOR ADMISSION

### THE BASICS

Legal Name: \_\_\_\_\_  

Last
First
Middle
Suffix

Do you have another name you prefer to be called? \_\_\_\_\_

Former Name: \_\_\_\_\_  

Last
First

Birth date: \_\_\_\_\_ Social Security Number (optional) \_\_\_\_\_  
 I would rather not enter my SSN or TIN at this time. I understand this may incur significant delays to any financial assistance and could result in IRS fines.

What is your gender identity?  Male  Female  Other  Prefer not to Answer

What is your racial or ethnic identification? (Check all that apply):  
 American Indian/Alaskan Native  Asian  Hispanic or Latino/a  Black/African American  
 Native Hawaiian/other Pacific Islander  White  Other  Prefer not to answer

Have you ever applied, attended, or worked at any community college in Virginia? (This includes taking dual enrollment courses in high school.) No \_\_\_ Yes \_\_\_ If yes, what is your student ID (EmplID): \_\_\_\_\_

### COMMUNICATING WITH YOU

Mailing Address: \_\_\_\_\_  

Country
Street/PO Box
City
State
ZIP

Is this also your permanent/home address? If no, provide address:  
 \_\_\_\_\_  

Country
Street/PO Box
City
State
ZIP

Has Virginia been your home for the past 12 months or more? \_\_\_\_\_

In which county or city do you currently live? \_\_\_\_\_ Personal email address: \_\_\_\_\_

Telephone: \_\_\_\_\_ If this is a cell, would you like to get updates from the college by text message? \_\_\_\_\_

If you plan to apply for financial assistance, Federal Financial Aid guidelines require that we obtain your voluntary consent to use electronic means, such as email, to provide you with information. Please review our guidelines on the college website. Indicate below that you agree.

If you disagree and do not consent to electronic communication, your financial aid award may be delayed. This delay may cause you to be dropped from your courses if other payment arrangements are not made. Additionally, payment of your student account with financial aid or reimbursement of your out-of-pocket costs may also be delayed.

I agree and have reviewed the guidelines  I do not agree  I do not plan to apply for financial aid

### YOUR EDUCATION

Which of the below describes your current high school education?

- I am currently attending a public/private high school in a U.S. state, territory or military installation.
- I am currently a home-schooled student in the U.S.
- I have already graduated from a public/private high school in a U.S. state territory or military installation.
- I have already graduated from home school in the U.S.
- I am currently attending or have graduated from a high school outside of the U.S.
- I have earned my GED.
- I do not have a GED/High School Diploma and I am not currently attending high school.

High School: \_\_\_\_\_ Graduation/anticipated graduation date \_\_\_\_\_  
 Name City State

Diploma Type:  Standard  Advanced  Modified Standard  General Achievement Diploma

College/University Information. If you have taken any college classes, please list the most recent first. Indicate any degrees earned in the last column with an A for Associate, B for Bachelor's, M for Master's, D for Doctorate, or P for Professional Degree. If you have not earned a degree, leave the Degrees column blank.

College or University	City, State/Country (if not USA)	Dates Attended (mm/yy — mm/yy)	Degrees Earned

Were you suspended or dismissed from the last college attended? \_\_\_\_\_

Program of Study: I plan to earn a degree, certificate, or diploma:  No  Yes  
 If yes, my primary educational goal is to (refer to the college catalog for a list of degrees):

- Transfer to a 4-year college or university
- Gain the education and skills to get a job in my chosen field of study

Name of Plan \_\_\_\_\_ Plan code \_\_\_\_\_

Term I plan to start classes: \_\_\_\_\_

As of the first day of the term, which of the following best describes your situation?

- I am taking classes through my high school to receive high school credit AND college credit.
- I am taking classes on my own not through my high school OR I am a home school student. I will receive college credit only.
- I am taking some classes through my high school AND some classes on my own for college credit only.
- I will have graduated high school by the time I start taking classes.

Pick a primary campus location: \_\_\_\_\_

### YOUR MILITARY SERVICE

Have you served or are you currently serving in the U.S. military? \_\_\_\_ Yes \_\_\_\_ No  
 Current military status:

- Active (includes reserves)  Inactive (includes reserves)  Veteran (includes retired and discharged)

Branch of military: \_\_\_\_\_ If active duty, official duty station (state): \_\_\_\_\_

Date entered (reporting date): \_\_\_\_\_ If Discharged, discharge date: \_\_\_\_\_

Are you a dependent or spouse of someone who is currently serving or has served in the U.S. military?  
 If yes, check one:  Dependent  Spouse

- Active (includes reserves)  Inactive (includes reserves)  Veteran (includes retired and discharged)

### YOUR BACKGROUND

Parent 1 Highest Level of Education

- I am not sure.  Unknown (parent did not raise me)  Did not finish high school  Attended college/ no degree
- Graduated from high school or GED  Associate's  Bachelor's  Post-bachelor's degree (Masters, Doctorate)

Parent 2 Highest Level of Education

- I am not sure.  Unknown (parent did not raise me)  Did not finish high school  Attended college/ no degree
- Graduated from high school or GED  Associate's  Bachelor's  Post-bachelor's degree (Masters, Doctorate)

What is your current citizenship status:

- Native U.S. Citizen (born in U.S. or abroad to a U.S. Citizen)  Permanent Resident of the U.S.
- Naturalized U.S. Citizen (received citizenship after birth)  Asylee
- Currently living outside of the U.S. and not a U.S. citizen/resident  Refugee
- Currently in the U.S. as a Non-immigrant Resident Alien  Resident Alien
- Other category not listed above

Visa Type: \_\_\_\_\_ Permanent Resident Number: \_\_\_\_\_ Country of Citizenship \_\_\_\_\_

What is your primary spoken language? \_\_\_\_ English \_\_\_\_ Other

## RESIDENCY

Not applying will automatically classify you as an out-of-state student. Out-of-state rates are more expensive than in-state rates and you may not qualify for any state financial aid. If you want to apply for in-state tuition rates, complete the questions below. If not, sign at the bottom of the page.

- I want to claim eligibility based on my spouse.  I am over 24 and want to claim eligibility based on myself.  
 I want to claim eligibility based on my parent.  I am under 24 and want to claim eligibility based on myself:  
 I want to claim eligibility based on my court appointed Legal Guardian.

If applying under one of the above, provide name:

\_\_\_\_\_

\_\_\_\_\_

First Last

Select all that apply:

- I am a Veteran or active duty member of the U.S. Armed Forces  
 Both of my parents are deceased and I have no adoptive or legal guardian  
 I have legal dependents other than my spouse.  
 I am financially self-sufficient.  
 I am a ward of the court or was a ward of the court until age 18.  
 I have a bachelor's degree and I am working on a graduate degree.  
 I am married.

If applying under spouse, parent or legal guardian, provide status:

- Native U.S. Citizen (born in U.S. or abroad to a U.S. Citizen)  Permanent Resident of the U.S.  
 Naturalized U.S. Citizen (received citizenship after birth)  Asylee  
 Currently living outside of the U.S. and not a U.S. citizen/resident  Refugee  
 Currently in the U.S. as a Non-immigrant Resident Alien  Resident Alien  
 Other category not listed above

Visa Type: \_\_\_\_\_ Permanent Resident Number: \_\_\_\_\_ Country of Citizenship \_\_\_\_\_

Has the person under whom you are applying lived in Virginia for the past twelve months? \_\_\_Yes \_\_\_No

For the past twelve months, which one of the following applies to the person under whom you are applying? Check one.

- Paid Virginia income taxes on all earned income.  Filed as a resident in ANOTHER state.  
 Filed as a resident in Virginia and a non-resident in another state.  
 Was a resident in a state without income tax.  Had no taxable income.

Do you live outside of Virginia, but worked in Virginia for the past twelve months and paid Virginia income taxes on at least \$14,500 of earned income?  Yes  No

For the past twelve months, has the person under whom you are applying:

Held a Virginia driver's license or Virginia DMV ID?  Yes  No If no, any other state?  Yes  No

Owned or operated a motor vehicle registered in Virginia?  Yes  No If no, any other state?  Yes  No

Been registered to vote in Virginia? If no, any other state?  Yes  No If no, any other state?  Yes  No

Release of Information:

In accordance with §23.1-407 of the Code of Virginia, your name, date of birth, gender, and student identification number will be submitted to the Virginia State Police. By proceeding with the application process, you consent to this submission.

Firearm Notice:

Possessing, brandishing, or using a weapon while on any college or VCCS office property, within any college or VCCS office facilities, or while attending any college or VCCS educational or athletic activities by students is prohibited, except where possession is a result of participation in an organized and scheduled instructional exercise for a course, or where the student is a law enforcement professional. By proceeding with the application process, you acknowledge and agree to abide by this policy if accepted to a VCCS college.

I certify under penalty of disciplinary action that all of the information is complete and accurate. I agree to supply the college with supporting documentation related to my application, if I am requested to do so.

This institution promotes and maintains educational opportunities without regard to race, color, sex, ethnicity, religion, gender, age (except when age is a bona fide occupational qualification), disability, national origin, or other non-merit factors.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent Legal Guardian

\_\_\_\_\_  
Date

## COLLEGE SPECIFIC

Which location is closest to your home?

- Alberta  Blackstone  Chase City  Emporia  Keysville  South Boston  South Hill  
 Online Classes Only

Do you plan to take any online classes?  Yes  No

The Family Education Rights and Privacy Act of 1974 (FERPA) states that a student must authorize in writing the release of her or his educational records to a third party. [<http://www.southside.edu/privacy>]. If you would like to grant this request, please select yes here.  Yes  No

If yes:

Provide a unique pin number that consists of 2 letters and 3 numbers. You are responsible for the security of this PIN. Protect it from unauthorized parties \_\_\_\_\_

Provide the name and relationship of a person that are authorized to access your records. Each person listed must have the password to access your records. \_\_\_\_\_

Provide the name and relationship of a person that are authorized to access your records. Each person listed must have the password to access your records. \_\_\_\_\_

I understand that I am electronically to grant approval of the release of records as designated. \_\_\_\_\_ (initials)

Do you plan to participate in any clubs or club sports?

- |   |   |
|---|---|
| <input type="checkbox"/> Anime Club             | <input type="checkbox"/> Phi Beta Lambda                      |
| <input type="checkbox"/> Campus Activities Team | <input type="checkbox"/> Student Veterans of America          |
| <input type="checkbox"/> Criminal Justice Club  | <input type="checkbox"/> Student Ambassadors                  |
| <input type="checkbox"/> Environmental Club     | <input type="checkbox"/> Transfer Club                        |
| <input type="checkbox"/> Fitness Club           | <input type="checkbox"/> WISE (Women in Search of Excellence) |
| <input type="checkbox"/> Gaming Club            | <input type="checkbox"/> Men's Basketball                     |
| <input type="checkbox"/> Human Services Club    | <input type="checkbox"/> Women's Softball                     |

Do you plan to participate in any student activities?

- Cultural Events (Irish Step Dance, African Dance Troop, Native American Hoop Dancing)  
 Entertainment Events (Magician, Game Show, Hypnotist)  
 Novelty Events (Candle Art, Personalized Jewelry, Stuff-A-Bear)  
 Awareness Programming (Domestic Violence, Sexual Assault, Disaster Relief, Women's History Month)