



# Undergraduate Admission Application

General Information (PLEASE PRINT)				
LAST NAME		FIRST NAME		MIDDLE INITIAL
				<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
DATE OF BIRTH (MM/DD/YY)	SOCIAL SECURITY NUMBER	E-MAIL		
BIRTH NAME (IF DIFFERENT FROM ABOVE)				
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
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
		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)		BIRTH COUNTRY
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"/> AUBURN HILLS	<input type="checkbox"/> BAKER ONLINE	<input type="checkbox"/> CASS CITY	<input type="checkbox"/> CULINARY INSTITUTE
			<input type="checkbox"/> JACKSON	<input type="checkbox"/> MUSKEGON
				<input type="checkbox"/> PORT HURON
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 <input type="checkbox"/> NO	IF YES, WHEN? (PLEASE SPECIFY)		
I PLAN TO ENTER (PLEASE PRINT THE YEAR) <b>20</b> _____	<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) <input type="checkbox"/> NO			HOUSING IS AVAILABLE AT THE FOLLOWING CAMPUS LOCATIONS: AUTO/DIESEL INSTITUTE, CULINARY INSTITUTE, FLINT, MUSKEGON, AND OWOSSO





# Undergraduate Admission Application

## 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](http://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 (Must Be Completed)

HAVE YOU EVER BEEN CONVICTED OF A MISDEMEANOR?  YES  NO      HAVE YOU EVER BEEN CONVICTED OF A FELONY?  YES  NO

DO YOU HAVE ANY CRIMINAL CHARGES PENDING?  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 \_\_\_\_\_

## College Use Only

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



# Residence Hall Application

## General Information (PLEASE PRINT)

LAST NAME		FIRST NAME		MIDDLE INITIAL	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
DATE OF BIRTH (MM/DD/YY)	SOCIAL SECURITY NUMBER		E-MAIL		
BIRTH NAME (IF DIFFERENT FROM ABOVE)					
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	

## Enrollment Information (PLEASE PRINT)

HAVE YOU ATTENDED BAKER COLLEGE BEFORE? <input type="checkbox"/> YES <input type="checkbox"/> NO		IF YES, WHEN? (PLEASE SPECIFY)
BAKER COLLEGE CAMPUS LOCATION <input type="checkbox"/> AUTO/DIESEL INSTITUTE OF MICHIGAN <input type="checkbox"/> CULINARY INSTITUTE OF MICHIGAN <input type="checkbox"/> FLINT <input type="checkbox"/> MUSKEGON <input type="checkbox"/> OWOSSO		
I PLAN TO ENTER (PLEASE PRINT THE YEAR) <b>20</b>	<input type="checkbox"/> FALL (SEPTEMBER) <input type="checkbox"/> WINTER (JANUARY) <input type="checkbox"/> SPRING (APRIL) <input type="checkbox"/> SUMMER (JUNE)	
ROOMMATE (FIRST CHOICE)	ROOMMATE (SECOND CHOICE)	ROOMMATE (THIRD CHOICE)

## Background Check Waiver

HAVE YOU EVER BEEN CONVICTED OF A CRIME? <input type="checkbox"/> YES <input type="checkbox"/> NO	DO YOU HAVE ANY CRIMINAL CHARGES PENDING? <input type="checkbox"/> YES <input type="checkbox"/> NO
I understand that I will be required to undergo a criminal background check in order to be admitted into housing. Any applicant who has a conviction resulting from a felony charge and/or a Criminal Sexual Conduct (CSC), or has a pending charge, <b>WILL NOT BE ACCEPTED</b> into any Baker College Residence Hall.	

## Room Deposit Information

**A room deposit of \$50.00 is due when the Residence Hall Application is submitted.** The deposit will be refunded after all Residence Hall charges have been taken out at the end of the academic year or if notice of cancellation is given in writing according to the following schedule:

**FALL QUARTER: PRIOR TO SEPTEMBER 1**

**SPRING QUARTER: PRIOR TO MARCH 1**

**WINTER QUARTER: PRIOR TO DECEMBER 1**

**SUMMER QUARTER: PRIOR TO JUNE 1**

**Deposits and any room fees will be forfeited if the student withdraws from housing and/or the College during a quarter or is dismissed for disciplinary reasons.**

## Applicant Signature

**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 DISMISSAL FROM THE RESIDENCE HALL AND/OR EXPULSION FROM THE COLLEGE.**

STUDENT SIGNATURE	DATE
PARENT/GUARDIAN SIGNATURE (IF STUDENT IS UNDER 18 YEARS OF AGE)	DATE

## College Use Only

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