

Office of Admissions and Student Records, 10230 Ridge Road, New Port Richey, FL 34654 727-816-3371 FAX 727-816-3389 www.phsc.edu

Application for Admission: COLLEGIATE HIGH SCHOOL					
Note: This Application Form Must be Processed with High School Counseling Office					
(no application fee required)					
 PHSC Campus location: Classes not offered at all PHSC campus locations. Please confirm campus location prior to registration. 		tions. () Returning to Collegiate HS	Fall admission only: August: (enter year) Due March 01 before Fall term * Deadlines for respective high schools may be earlied Date application submitted to PHSC New Port Richey Admissions:	er	
High School currently attending		nding HS Staff Representative or counselor/telephone #	Entering HS grade: () 11 th grade () 12 th grade Estimated HS grad date:		
	ing for the following	() AA Degree	() AS Degree	!	
program (select one):		() CompTIA Security+() CompTIA Network+() CompTIA A+	() CCENT/CISCO () CCNA/CISCO () AutoCAD Foundations		
Please form	EUCTIONS: e complete all items of carefully, including cures and dates.	test scores (PERT) and appropOfficial transcripts of any prioradmission.	high school GPA of 3.0 ngent upon submission of appropriate placeme oriate school official's signature. or college work completed required prior to Social Security card must be presented with the		
1. Social Security Number:					
2.	Legal Name:	Last	First Middle I	nitial	
3.	Address:	Address: Number & Street (include apt number if appropriate) County City/State/Zip code			
4.	Phone Numbers:(() Primary	() Other		
5.	Date of Birth:		Gender: [] Male [] Female		
6.	Email Address:				
7.	Check all that apply White Asian/East Indian Black/African American			ndo r	
8.	Does your mother/guar	Mative American/I rdian have a bachelor's degree?	Indian Mative Hawaiian/Pacific Islam Yes No Unsure/Not answered	naer	
9.					

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10. Ale you a chizell	of the Officer States? [] Tes []	INO				
If NO, indicate	te your country of birth:	Citizenship				
USCIS Status	s [] Alien Resident Number:	(attach copy of card)				
	[] Non-resident of U.S. Visa Type:	Expiration Date:				
	(Attach a copy of your passport and I-94 card)					
11. Is a language othe	er than English your native (first) language?	Yes No				
STUDENT CERTIFICATION						
I certify that the answers given herein are true and correct to the best of my knowledge. I agree that, if accepted, I will						
abide by all rules, regulations and policies of the College, now and hereafter adopted, as set forth in the District Board of						
Trustees Rules and as published in the College Catalog/Student Handbook. I understand that additional rules may apply as						
agreed to in the county and PHSC Collegiate High School agreement. I understand that falsification of information in any						
admissions document is grounds for denial of admission and may result in dismissal from the College. I hereby give						
permission to PHSC to photograph me and to publish such photos in any PHSC advertising media, including videotapes,						
slides, printed publications and any other media form, for all of the uses permitted by Florida Statute. I also agree to the						
release of any transcripts and/or test scores to be sent electronically to or from PHSC to other educational institutions as						
needed for educational purposes.						
Applicant Signature:	T pur poses.	Data				
Applicant Signature:		Date:				
	PARENT CERTIFICAT	TION				
I certify that the ans						
I certify that the answers given herein are true and correct to the best of my knowledge. I further acknowledge that as						
an enrolled college student, student data and record information from the college is protected by federal education law						
and will not be released to the parent/guardian. The College will release appropriate information regarding students attending PHSC Collegiate High School to the public school district only. Inquiries regarding student attendance or						
	e directed to the public school district.	y. Inquiries regarding student attendance of				
	directed to the public school district.	Data				
Parent Signature:		Date:				
HIGH SCHOOL REPRESENTATIVE - COUNSELOR/ADVISOR CERTIFICATION						
I certify that the answers given herein are true and correct to the best of my knowledge. I certify that the student meets						
all eligibility criteria for admission, for continuing enrollment, for satisfactory academic progress as outlined in the Collegiate						
High School Program agreement signed with our county school system.						
HS School District		Date:				
Representative						
Signature						

*Please add school seal/stamp to authenticate authorization.

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Notification of Social Security Number Collection and Usage

In compliance with Florida Statute 119.071(5), this document serves to notify you of the purpose for the collection and usage of your Social Security number (SSN).

Pasco-Hernando State College (PHSC) collects and uses your SSN only for the following purposes in performance of the college's duties and responsibilities. To help protect your identity, PHSC policies and procedures prohibit the release or disclosure of your SSN to unauthorized parties contrary to state and federal law, and assigns you a unique student or employee identification number. This unique ID number is used for all associated employment and educational purposes at PHSC.

Students

Admissions

Federal legislation relating to the Hope Tax Credit requires that all postsecondary institutions report student SSNs to the Internal Revenue Service (IRS). This IRS requirement makes it necessary for community colleges to collect the SSN of every student. A student may refuse to disclose his or her SSN to the college for this purpose, but the IRS is then authorized to fine the student in the amount of \$50.00.

In addition to the federal reporting requirements, the public school system in Florida uses SSNs as a student identifier (section 1008.386, FS). In a seamless K-20 system, it is beneficial for postsecondary institutions to have access to the same information for purposes of tracking and assisting students in the smooth transition from one education level to the next.

Financial aid

A student's SSN is required for the following financial aid purposes:

The United States Department of Education's (USDOE) Free Application for Federal Student Aid (FAFSA) requires all applicants to report their SSN to be used for all federal financial aid programs as a student identifier for processing and reporting. In addition to its use by USDOE as a student identifier, the SSN is required in order for the Department of Homeland Security to investigate citizenship status, for the Federal Work Study Program, and is required on all loan applications for use by the lender, servicer, or guarantor.

PHSC collects a student's SSN on certain institutional scholarship applications for student files and federal and state audit/reporting purposes.

If you are a recipient of a State of Florida grant or scholarship such as the Florida Student Assistance Grant, Florida Work Experience or Bright Futures, the State of Florida Department of Education will require the use of the SSN on their grant/scholarship disbursement website and for reporting purposes.

Library

Student, faculty, and staff SSNs will be used in the college center for library automation, Library Information Network for Community Colleges (LINCC) for online login authentication, patron verification and the elimination of duplicate records.

Outreach programs

The Take Stock in Children, College Reach-Out Program and other similar programs are youth outreach (intervention) projects funded by discretionary grants from the U.S. or Florida departments of education. In order to verify a participant's project eligibility, Social Security numbers are required and also later used when submitting information for the Annual Performance Reports due to the U.S. or Florida departments of education.

Workforce programs

These programs, funded through the Agency for Workforce Innovation (AWI), use your SSN as an identifier for program enrollment and completion. Also, it is used for entering placement information into either the OSMIS or the Employ Florida Marketplace statewide data collection and reporting system. Because these are performance based contract programs, AWI requires that all participants and their program related activities be recorded in the Florida state system.

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