



MESA Community College Program (MCCP) Application

Academic Year 2009/10

PLEASE COMPLETE ALL ITEMS AND PRINT CLEARLY

Social Security Number: _____ - _____ - _____ Campus/Student ID: _____

First Name: _____ Middle (or initial): _____ Last Name: _____

Permanent Address: _____

Current Address/Mailing Address (if different): _____

City: _____ State: _____ Zip: _____

Home Phone: () _____ Work Phone: () _____ Cell Phone: () _____

E-mail: _____ Birth date: ____/____/____ Gender: Male Female

Ethnicity: (1) _____ (2) _____ American Indian/Alaskan Native tribal affiliation: _____

Is a language other than English spoken regularly in your home? No Yes If yes, specify: _____

Residential status:

- US Citizen
- Permanent Resident
- F1 Visa
- Resident Alien

When did you first enroll at this college:

_____/_____
Semester Year

Current College Counselor:

Total number of college units completed:

- 0-29 30-60 60+

Do you have a Bachelor's degree?

- Yes No

Current college GPA: _____

Declared Major: _____

What was your first college math class?

Current science and math classes:

Completed science and math classes
(any college):

Intended Transfer College(s) – in order of
preference:

1. _____
2. _____
3. _____

Prospective date of transfer: ____/____

Semester Year

Previous school(s) attended:

High School: _____

Date: _____

College: _____

Dates: _____

College: _____

Dates: _____

Obstacles that may interfere with your
education (check all that apply):

- Financial need
- Employment issues
- Family obligations
- Knowledge of educational system
- Exceptional needs (specify below)

Are you employed? Yes No

If yes, how many hours per week? _____

Are you a Veteran? Yes No

Highest level of education achieved by each of your
parents/guardians (please indicate by using a letter):

_____ Father _____ Mother

- A. No school/elementary school
- B. 8th grade or less
- C. Some high school
- D. High School graduate
- E. Some college/university
- F. Community college degree
- G. 4-year college degree
- H. Professional degree (law, medical, etc)
- I. MS/MA/MBA/Ph.D.
- J. Other _____
- K. Don't know

Type of work your parents or guardian have done over the past years or
prior to retiring (please indicate by using a letter):

_____ Father _____ Mother

- A. Never Employed
- B. Farm Worker
- C. Business Administration
- D. Retail/Sales/Clerical
- E. Mechanic
- F. Professional – (Doctor, Lawyer, Other Professional)
- G. Factory Worker
- H. General Laborer
- I. Teacher/Professor
- J. Skilled technician – Medical, Educational, Trades
- K. Engineer/Computer Scientist/Scientist
- L. Other _____
- M. Don't know

STUDENT CONTRACT

If you are determined eligible for MESA, you are agreeing to follow the student contract below.

*Following the Student Contract is part of your eligibility requirement for the MESA Community College Program.
Please read the contract through, in order to fully understand what will be expected of you as an active MESA student.*

1. Attend a MESA Orientation.
2. Must obtain a complete transfer educational plan from a Mission College Counselor or the MESA Director.
3. Enroll in and pass the MESA Student Success Course (Counseling 102 Instructor: Perlas).
4. Volunteer at least 2 hours a semester for MESA or a community agency pertaining to your major.
5. Participate in at least one MESA event every semester.
6. Communicate with your Peer Mentor at least 2 times a semester. A Peer Mentor (fellow MESA Student) will be assigned to you after you complete the MESA Orientation.

I give my permission for MESA to give my name, phone number, and address to college and employer representatives, and to use my photograph in MESA and college promotional materials. Yes No

By applying to the MESA Community College Program, I understand that I give my permission for MESA to obtain information about my performance from colleges and testing agencies, financial aid and other offices to determine eligibility for the MESA program. You may be asked to provide additional information for eligibility determination.

I certify that I have provided true and correct information.

MCCP Applicant signature

Date

If under 18 years of age, signature
of Parent or Guardian

Date

MCCP Counselor signature

Date

MCCP Director signature

Date