

San Bernardino Valley College
701 S. Mt. Vernon
San Bernardino, CA 92401
(909) 888-6511



Crafton Hills College
11711 Sand Canyon Road
Yucaipa, CA 92399
(909) 794-2161

APPLICATION FOR ADMISSION - SAN BERNARDINO VALLEY COLLEGE

Please Note: Students are encouraged to purchase and use a copy of the College Catalog and/or Schedule of Classes (available at the bookstore). Reference copies are available in the library and the counseling / academic-advising center.

STEPS FOR ADMISSION:

1. Eligibility:

The following groups are eligible for admissions:

- Any individual, age 18 or above, who can reasonably profit from instruction.
- Any individual who has graduated from high school or who has been awarded a California Certificate of Proficiency or who has successfully completed the GED.

Students from other colleges may be admitted with advanced standing upon presentation of official transcripts.

High school juniors and seniors may enroll under the following conditions:

- They must have a GPA of 3.0 or better, as verified by an official transcript.
- They must submit a *Special Student Attendance Approval* form signed by a parent and by their high school principal.
- The courses taken may not duplicate courses currently available in their high school.

2. Filling an Application with Admissions:

All new and / or returning students must file an application for admission before they register for classes.

- Be sure to complete the entire application and statement of residence and sign and date the application.
- Submit the completed form to the Admissions Office.

3. Transcripts of Prior Work:

Students should arrange to have official transcripts of all (high school, if a high school student) college work sent to the Admissions Office. These documents are important to have on file for proper counseling / advisement.

4. Assessment / Orientation / Advisement:

New students are strongly encouraged to participate in the college's Assessment / Orientation / Advisement program. This program is designed to ensure that students take classes that best match their current level of preparation. During the 3-hour assessment session, students are given tests in English, Reading, and Mathematics. While the tests are being scored, students are introduced to the college's services. At the end of the session when the assessment scores are ready, counselors help students select their courses for the semester. To schedule an Assessment / Orientation / Advisement session, call San Bernardino Valley College - (909) 888-6511, ext. 1143 or Crafton Hills College (909) 794-2161 ext. 3267 for a day or evening appointment. (If a student submits his/her admissions application in person, an Assessment / Orientation / Advisement appointment will be scheduled at the time the paperwork is filed.)

5. Enrollment in Classes:

The *Schedule of Classes* provides detailed instructions on the procedures involved in registering for classes. Students may register either by telephone or in person, in accordance with the dates identified in the *Schedule of Classes*. **Attending classes without formally enrolling (auditing) is not permitted.**

Students who have an outstanding financial obligation will not be allowed to register for classes until the obligation is cleared. Examples of obligations falling under this policy include but are not limited to: returned checks, unpaid loans, equipment breakage, and unpaid library fines.

The college reserves the right to cancel any class that does not meet the minimum size requirements established by the district. In some cases, cancellation may take place before the first class meeting. Students will automatically be mailed a refund of the enrollment fees for any class cancelled by the college.

6. Payment of Fees:

Current fees are listed each semester on the payment coupon in the *Schedule of Classes*. All fees are due and payable at the time of registration. In addition to enrollment fees, students can be assessed the following: health fee, accident insurance, Student Representation fee (SBVC only) and Student Center fee. Optional fees include those for a parking permit and for the Associated Students (AS) discount card.

Students who are not bonafide residents of California are required to pay non-resident tuition. Non-resident tuition is payable at the time of registration.

7. Class Attendance:

Students who are not in attendance at the first class meeting are considered "no-shows." Instructors may choose to drop no-shows in order to give their seats to non-registered students seeking admission.

8. Late Registration:

Applicants who do not enroll during the registration period may enroll in classes during the first two weeks of the full-term fall and spring semesters, using the "add/drop" process described below. However, any instructor may refuse to admit a late registrant when the work missed cannot reasonably be made up, when the class is full, or when normal progress in the course would be impossible or unsafe.

9. Add/Drop:

Registered students may change their programs during a designated period at the beginning of each semester. Once the telephone registration period has passed and/or after the first week of full-term classes (or the first day of classes lasting less than 17 weeks), a *Request for Add / Drop* form is needed to change a schedule. These forms are available through the Admissions Office. Students should request a computer print-out whenever they make a schedule change. If a schedule is revised and total number of units changed, the amount of enrollment fees may also change. Students must pay any additional fees if the number of units taken increases due to a schedule change at the time of registration.

10. Refunds:

The amount of a refund for enrollment and service fees will vary in accordance with the following conditions:

- If a class is cancelled, a student will automatically be mailed a refund of enrollment, health and student center fees. No processing fee will be charged for overpayments or canceled classes.
- If a student drops a class before the first day of classes, he/she will automatically be mailed a refund of enrollment, health and student center fees. There will be a \$10.00 refund-processing fee. Refunds of amounts less than \$15.00 will not be processed.
- If a student drops a class after the first day of classes but on or before the end of the second week of classes (or 10% of the term for classes less than 17 weeks in length), he/she will automatically be mailed a refund of enrollment fees. All other fees are non-refundable as of the first day of class.
- If a student drops a class after the second week of classes (or after the 1st 10% of the term for classes less than 17 weeks in length), he/she is not eligible for a refund.

It takes approximately six to eight weeks to process refund checks. If a student wishes to apply the refund credit toward registration in another class, he/she must submit the drop and add at the same time.

San Bernardino Valley College - APPLICATION FOR ADMISSION

PLEASE ANSWER ALL QUESTIONS AND PRINT CLEARLY. Incomplete applications cannot be processed.

NON-DISCRIMINATION POLICY: San Bernardino Community College District, pursuant to the requirements to Title IV, VI, and VII of the Civil Rights Act of 1964 and Title IX of the Educational Amendment of 1972, does not discriminate against applicants, employees, or students on the basis of race, color, religion, sex, national origin, native language, or handicap in its employment policies and/or educational programs and activities, including admission and accessibility to such.

1. Legal Name: (Do not use nicknames.)

Last Name	First Name	Middle Initial	(Names Previously Used)
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2. Social Security Number:

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3. Legal Address: (A legal address is one used for voting, motor vehicle registration, income tax, and other legal purposes.)

No. _____ Street _____ Apt. _____

City _____ State _____ Zip Code _____

County/Country _____

From: (Mo./Yr.)

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To: (Mo./Yr.)

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4. Mailing Address: (If different than legal address)

No. _____ Street _____ Apt. _____

City _____ State _____ Zip Code _____

From: (Mo./Yr.)

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To: (Mo./Yr.)

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5. Telephone Number:

(_____) _____ (_____) _____
Home Business

6. Date of Birth:

Month _____ Day _____ Year _____

7. Place of Birth

City _____ State/Country _____

8. Ethnic Background: (check one)

- | | | |
|--|--|--|
| <input type="checkbox"/> (AC) Asian | <input type="checkbox"/> (B) African-American Non-Hispanic | <input type="checkbox"/> (PH) Hawaiian |
| <input type="checkbox"/> (AI) Asian Indian | <input type="checkbox"/> (F) Filipino | <input type="checkbox"/> (PS) Samoan |
| <input type="checkbox"/> (AJ) Japanese | <input type="checkbox"/> (HM) Mexican, Mexican-American, Chicano | <input type="checkbox"/> (PX) Other Pacific Islander |
| <input type="checkbox"/> (AK) Korean | <input type="checkbox"/> (HS) South American | <input type="checkbox"/> (W) White Non-Hispanic |
| <input type="checkbox"/> (AL) Laotian | <input type="checkbox"/> (HX) Other Hispanic | <input type="checkbox"/> (X) Unknown |
| <input type="checkbox"/> (AM) Cambodian | <input type="checkbox"/> (N) American Indian / Alaskan Native | <input type="checkbox"/> (XD) Decline to State |
| <input type="checkbox"/> (AV) Vietnamese | <input type="checkbox"/> (O) Other Non-White | |
| <input type="checkbox"/> (AX) Other Asian | <input type="checkbox"/> (PG) Guamanian | |

9. Gender

- (M) Male
 (F) Female

10. Admission For:

- Fall Spring Summer
Year _____

11. Major/Academic Program

Please enter appropriate code: (See Inserted page for code lists.)

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12. Admit Status: (check one)

- | | |
|---|--|
| <input type="checkbox"/> (FFV) First enrollment in any college | <input type="checkbox"/> (RSV) Returning to SBVC after an absence of one or more semesters with no attendance at any other college |
| <input type="checkbox"/> (FTV) First enrollment at SBVC but have attended another college | <input type="checkbox"/> (CSV) Attended SBVC last semester |
| <input type="checkbox"/> (RTV) Returning to SBVC after attending other college | <input type="checkbox"/> (SPV) Special admit student (K-12) |

13. Educational Goal: (check one)

- | | |
|--|--|
| <input type="checkbox"/> (A) Obtain a B.A. degree after completing a 2-year degree | <input type="checkbox"/> (H) Advance in current job/career (update skills) |
| <input type="checkbox"/> (B) Obtain a B.A. degree w/o a 2-year degree | <input type="checkbox"/> (I) Maintain certificate or license (e.g. Nursing) |
| <input type="checkbox"/> (C) Obtain an associate's degree w/o transfer | <input type="checkbox"/> (J) Educational Development |
| <input type="checkbox"/> (D) Obtain a vocational degree w/o transfer | <input type="checkbox"/> (K) Improve basic skills in English, Reading, or Math |
| <input type="checkbox"/> (E) Earn a vocational certificate w/o transfer | <input type="checkbox"/> (L) Complete credits for high school diploma or GED |
| <input type="checkbox"/> (F) Discover/formulate career interest, plan/goals | <input type="checkbox"/> (M) Undecided on goal |
| <input type="checkbox"/> (G) Prepare for a new career (acquire job skills) | <input type="checkbox"/> (P) Personal Interest |

NOTE: All applicants must complete the Statement of Residency on the back of this form

14. Citizenship: (check one)
 (US) U.S. Citizen Other _____

15. Is English the language you speak most often? (E) Yes (N) No

16. Have you lived in California continuously since birth? (Y) Yes (N) No

For Office Use Only
Residency Status

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17. Special Services: (SBCCD is committed to your educational success. Each area listed below provides special services. Please indicate those services that would benefit or interest you. Check all that apply.)

<input type="checkbox"/> (1) Financial Aid	<input type="checkbox"/> (4) Transfer Student	<input type="checkbox"/> (7) Course Tutoring	<input type="checkbox"/> (10) Assessment Testing
<input type="checkbox"/> (2) Child Care	<input type="checkbox"/> (5) Employment Assistance	<input type="checkbox"/> (8) English as 2 nd language	
<input type="checkbox"/> (3) Disabled Student	<input type="checkbox"/> (6) Basic Skills	<input type="checkbox"/> (9) Extended Oppty. Program	

18. Are you a veteran or a dependent of a veteran eligible for benefits? (Y) Yes (N) No

19. Do you intend to apply for financial aid? (Y) Yes (N) No

20. Intended Load: (Check one)

<input type="checkbox"/> (LP) Less than part time <small>Fall & Spring - Less than 6 units Summer - Varies - See Schedule</small>	<input type="checkbox"/> (P) Part time <small>Fall & Spring - 6 units to 11.9 units Summer - Varies - See Schedule</small>	<input type="checkbox"/> (F) Full time <small>Fall & Spring - 12 units to 17.9 units Summer - Varies - See Schedule</small>	<input type="checkbox"/> (O) Overload <small>Fall & Spring - 18 units or more Summer - Varies - See Schedule</small>
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21. How many hours PER WEEK do you expect to work for pay while attending SBVC? (Check one)

<input type="checkbox"/> (1) None	<input type="checkbox"/> (4) 20-29
<input type="checkbox"/> (2) 1-9	<input type="checkbox"/> (5) 30-39
<input type="checkbox"/> (3) 10-19	<input type="checkbox"/> (6) 40 or more

22. Institutions Attended: (Please enter the appropriate high school and college code from the insert along with the name and address of every institution you have attended.)

PART A:
(If you are currently attending high school, please complete the following, if not, skip to Part B.)
 Name of High School: _____ City _____ State _____
 Year began attending _____

	High School Code
	_ _ _ _ _ _ _

PART B:
 Name of High School: _____ City _____ State _____
 Years attended from _____ To _____ Graduated? Yes No Year _____

	High School Code
	_ _ _ _ _ _ _

Most Recent College: _____ City _____ State _____
 Years attended from _____ To _____ Graduated? Yes No Year _____

	College Code
	_ _ _ _ _ _ _

Previous College: _____ City _____ State _____
 Years attended from _____ To _____ Graduated? Yes No Year _____

	College Code
	_ _ _ _ _ _ _

23. Graduation Type: (Check one)

<input type="checkbox"/> (1) Special student currently enrolled in grades Kindergarten - 10	<input type="checkbox"/> (7) Passed the GED/Cert. of Equivalency
<input type="checkbox"/> (2) High school student currently in grades 11-12	<input type="checkbox"/> (8) Certificate of Proficiency
<input type="checkbox"/> (3) Not a high school graduate/not in high school	<input type="checkbox"/> (9) Earned a Foreign Secondary School Diploma
<input type="checkbox"/> (4) Currently enrolled in adult school	<input type="checkbox"/> (10) Received Associate's Degree
<input type="checkbox"/> (5) Earned a U.S. high school diploma	<input type="checkbox"/> (11) Received Bachelor's Degree
<input type="checkbox"/> (6) Other	

24. Certification:
 I hereby certify UNDER PENALTY OF PERJURY that the information on this form is correct. I understand that falsification or withholding information requested on this form may result in my dismissal from San Bernardino Community College District. I agree to adhere to the Rules, Regulations and Policies of the San Bernardino Community College District.

Signature _____ Date _____

STATEMENT OF RESIDENCY

All applicants must complete this entire section. – DO NOT LEAVE ANY QUESTION BLANK.

NOTE: If additional information is needed to determine your residence status, you will be required to present evidence in accordance with Educational Code Sections 68040 et seq. The burden of proof to clearly demonstrate both physical presence in California and intent to establish California residence is the responsibility of the student.

1. Are you an U.S. Citizen? (US) Yes (If you are NOT an U.S. Citizen, you **must** give the information below)
 (NOTE: **both** items A and B **must** be completed.)

A. Immigration Status (mark appropriate category below, then list card or visa number and date issued).

<input type="checkbox"/> (PE) Permanent or Resident Visa	Immigration Card Number	Date Issued
<input type="checkbox"/> (TE) Temporary Resident	Immigration Card Number	Date Issued
<input type="checkbox"/> (RE) Refugee/Asylee	Immigration Card Number	Date Issued
<input type="checkbox"/> (ST) Student Visa (F-1 or M-1)	Visa Number	Date Issued
<input type="checkbox"/> (OT) Other Status	Visa Type	Date Issued
	Visa Number	Date Issued

B. Country of Citizenship or Origin _____

2. Do you claim California as your permanent residence? Yes No
 (If YES, you **must** answer questions A through D below.)

A. Are you registered to vote in California? Yes No

B. In what state did you last file a State income tax return? _____ Year? _____ No

C. Are any of the following persons currently on **ACTIVE** military duty with, (or discharged within the last 12 months from), the U.S. Armed Forces?
 (Please mark all appropriate persons.)
 None Self Spouse Parent or Guardian

D. Have you lived at your present address for more than one year? Yes No
 If NO, list all previous addresses you have had in the past TWO years:

Address:

No.	Street	Apt.
City	State	Zip Code

From: (Mo./Yr.)

To: (Mo./Yr.)

Address:

No.	Street	Apt.
City	State	Zip Code

From: (Mo./Yr.)

To: (Mo./Yr.)

3. Questions which must be answered by any student who will not be 19 years of age when the semester begins:

A. Are your natural parents or legal guardians divorced? Yes No

B. If YES, list name and address of person who has legal physical custody of you:

Full Name: _____

Address: _____

4. I hereby certify, UNDER PENALTY OF PERJURY, that all information supplied on this statement of residency is complete and accurate to the best of my knowledge.

Signature _____ Date _____

HIGH SCHOOL CODES

Code	School	Code	School	Code	School
(363022)	Alta Loma	(363300)	Eisenhower	(363059)	Rialto
(363042)	Apple Valley	(363037)	Etiwanda	(363526)	Rim of the World
(363052)	Ayala	(363330)	Fontana	(363030)	San Andreas/Highland
(333021)	Banning	(363055)	Fontana A. B. Miller	(363584)	San Bernardino
(363132)	Bloomington	(363040)	Hesperia	(363608)	San Gorgonio
(363080)	Barstow	(363390)	Montclair	(363023)	Serrano
(333047)	Beaumont	(333377)	Moreno Valley	(363074)	Sultana
(363106)	Big Bear	(363499)	Orangewood	(363674)	Twenty-nine Palms
(363222)	Cajon	(363448)	Ontario	(363758)	Upland
(363220)	Chaffey	(363468)	Pacific	(363765)	Valley View
(363036)	Chaparral	(363057)	Rancho Cucamonga	(363801)	Victor Valley
(363250)	Chino	(363504)	Redlands	(363850)	Yucaipa Senior
(363274)	Colton	(363077)	Redlands East Valley	(363861)	Yucca Valley
(700000)	Other foreign	(600000)	Other out of state	(300000)	Other California

COLLEGE CODES

Code	College	Code	College
(196140)	California State Polytechnic University, Pomona	(365594)	San Bernardino Valley College
(366184)	California State University, San Bernardino	(337797)	University of California, Riverside
(365210)	Chaffey College	(368700)	University of Redlands
(335125)	College of the Desert	(365790)	Victor Valley College
(365211)	Crafton Hills College		
(335403)	Mount San Jacinto College		
(335687)	Riverside Community College		

ESTIMATED FEES AND EXPENSES

- State-mandated Enrollment Fee: \$12.00 per unit.
- Mandatory Student Health Fee: \$11.00 per semester (Fall/Spring), \$8.00 Summer, (\$1.50 if enrolled in off-campus classes only.)
- Associated Students Membership Fee: \$5.00 per semester.
- Student Representation Fee: \$1.00. (SBVC only)
- Campus Parking Permit: \$20.00 per semester.
- ALL FEES ARE SUBJECT TO CHANGE WITHOUT NOTICE!

NOTE: Special admissions procedures are required for courses in Nursing, Police Academy, Fire Science, Radiology, Respiratory Care, and EMS.

FINANCIAL AID INFORMATION – FEE WAIVERS

If you are a California resident, you may be eligible for a California Community College Board of Governors fee waiver. Check with the Financial Aid Office. Federal financial aid applications are also available from the Financial Aid Office or in most district high school counseling offices. Applications should be submitted at least 10 weeks prior to the beginning of the semester to allow adequate processing time.

NOTE: No person subject to the federal Military Service Act shall be eligible to receive federal financial aid if they have not registered for Selective Service in accordance with the act.

