

How to Apply

The items below must be submitted to be considered for admission. Please send to the address above.

ALL APPLICANTS MUST SUBMIT THE FOLLOWING:

- Complete application for admission;
- Non-refundable \$20 application fee;
- High school transcript for all years attended sent directly from school;
- Official GED test results sent directly from school or Department of Education in state issuing the GED (if applicable);
- Transcripts of all previous college/university work sent directly from each institution;
- Scholastic Aptitude Test (SAT) scores sent directly from the College Board or the high school for applicants who will graduate or have graduated from high school within the previous three years.

ADDITIONAL REQUIREMENTS FOR MEDICAL ASSISTING, MEDICAL RADIOGRAPHY, NURSING AND SURGICAL TECHNOLOGY APPLICANTS:

- Application essay (see back);
- Two recommendations sent directly from the evaluator*;
- Completed "Student Disclosure of Criminal Convictions, Pending Criminal Charges and Certain Disqualifications Form" *;
- Pre-admission test results for applicants to the Medical Radiography and Nursing programs*.

OTHER:

- EMS Applicant Packet for applicants to the Emergency Medical Services program*.
- A personal interview is required for selected programs*.

**Forms/info can be found on the Admissions tab at www.emcc.edu or will be provided by the Admissions Office upon receipt of application.*

APPLICATION FOR ADMISSION

Legal Name in Full:

Last	Suffix	First	Middle Initial
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Birth/Former Name(s): _____

Preferred Name (Nickname): _____

Permanent Mailing Address:

Street or PO Box	Apt. #
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City	State	ZIP
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Maine County: _____

Home Phone (include area code): _____

Cell Phone (include area code): _____

E-Mail Address: _____

Social Security Number: _____

Are you a resident of Maine? Yes No
If yes, date you became a legal resident: _____
Month Year

Are you a U.S. Citizen or permanent resident (check one): Yes No

Indicate Alien Registration # (if applicable): _____

If you are not a U.S. Citizen or permanent resident, indicate your country of citizenship: _____

Date of Birth*: _____ Gender*: Male Female Ethnicity*: Hispanic/Latino Not Hispanic/Latino

Race (check all that apply)*: American Indian or Alaskan Native Black or African American
**Optional items; information used for reporting purposes only.* Native Hawaiian or Other Pacific Islander Asian White

Have you previously attended EMCC? Yes No If yes, date of last attendance: _____

Indicate the highest degree you have earned (if applicable):
 Associate's Degree Bachelor's Degree Master's Degree Other _____

Are you a veteran? Yes No If yes, are you eligible for veterans' benefits? Yes No

High school last attended: _____
Name of School City State

H.S. Graduation/GED Year: _____ Will Graduate Graduated GED

Did you attend a vocational program in high school? Yes No

If yes, name of Vocational/Career/Technical Center: _____

