

6250 El Cajon Blvd. San Diego, CA. 92115 USA | www.platt.edu  
 619.265.0107 | FREE 866.752.8826 | FAX 619.308.0570

<b>OFFICE USE ONLY</b>	Source	Date
Rep		

**ADMISSION REQUIREMENT:**

The minimum requirement for admission to the college is graduation from a high school or the General Education Development (GED) high school equivalency. If the applicant is a high school graduate, he/she must provide an official high school transcript, i.e., sent from the high school directly to Platt College. If the applicant had received a GED or CHSPE, he/she must provide Platt College with the record of the test results.

Provisional Status: All students are admitted to Platt College on a provisional basis until the College has received evidence that the student has graduated from an accredited high school or the equivalent. In the Education History section, please check one of the two options, "High School" or "GED" and complete applicable information.

**APPLICANT'S INFORMATION**

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Applicant's Full Legal Name  Male  Female

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Social Security No. *(required for U.S. residents)*      -      -      Marital Status     Single     Married     Separated

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Driver's License #      Race or Ethnic Origin *(optional)*

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Birth Date    /    /      Birthplace *(City/State/Country)*

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U.S. Citizen     Permanent Resident *(copy of green card required)*     Non-U.S. Citizen: *Country of citizenship* \_\_\_\_\_ *Visa type* \_\_\_\_\_

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Permanent Home Address

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City/State      ZIP/Postal Code      Country

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Cell phone      Home phone      E-mail

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Mailing Address *(if different from above)*

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City/State      ZIP/Postal Code      Country

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Have you ever been convicted of a felony       Yes     No      *(If yes, please explain)*

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Do you have any illnesses, disabilities, handicaps, or substance abuses which may interfere with your school or job performance?  
 Yes     No      *(If yes, please explain)*

**CAREER SERVICE INFORMATION**

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Are you willing to relocate for employment after graduating from Platt College?    ( ) Yes    ( ) No

**IN CASE OF EMERGENCY CONTACT**

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Contact Name      Relationship      phone

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Address      City/State      Zip/Postal Code

**EMPLOYMENT DATA**

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Present Employer      Telephone

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Address      City/State      Zip/Postal Code

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Job Title      Length of Employment

**TERM OF ENTRY / PROGRAM(S) INTERESTED IN**

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Start Date : \_\_\_\_ / \_\_\_\_ / \_\_\_\_    I plan to attend:     Morning (8AM-12PM, M-F)     Afternoon (1PM-5PM, M-F)     Evening (6PM-10PM, M-TH)

Degree Programs

- Bachelor of Science Degree: Media Arts
- Associate of Applied Science Degree: Graphic Design
- Associate of Applied Science Degree: Multimedia

Diploma Programs

- Diploma: Graphic Design
- Diploma: Multimedia Design
- Diploma: Specialized Multimedia Animation
- Diploma: Specialized Web Design
- Diploma: Specialized Digital Video Production
- Diploma: Adv. Specialized 3D Animation
- Diploma: Adv. Specialized Web Design
- Diploma: Adv. Specialized DV Production

**EDUCATION HISTORY**

Name of High School	Diploma	<input type="radio"/> Yes	<input type="radio"/> No
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City/State	Date of Graduation	/	/
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If you did not graduate from High School, did you receive a GED / CHSPE?  Yes  No *(If yes, complete the information below)*

Where test was taken:	Mother's Maiden Name:
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Date taken: / / Institution Name	City/State
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If you have any previous training above the high school level, whether college or vocational, you must list all names of the schools attended. This information is required whether you believe it applies to courses offered at Platt College. All transcripts submitted must be OFFICIAL, i.e., sent from the institution directly to Platt College.

Are you currently attending, or have you previously attended, a college or university?  Yes  No

Name of School	Dates Attended _____ to _____	<input type="radio"/> Degree	<input type="radio"/> Diploma
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Name of School	Dates Attended _____ to _____	<input type="radio"/> Degree	<input type="radio"/> Diploma
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Name of School	Dates Attended _____ to _____	<input type="radio"/> Degree	<input type="radio"/> Diploma
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**MILITARY EXPERIENCE**

Branch:  Active  Veteran  Dependent

Veterans should be aware that the G.I. Bill prohibits duplication of training a veteran has received elsewhere, and prohibits enrollment in a course of training leading to an educational, professional or vocational objective for which they are already qualified.

**FATHER/GUARDIAN INFORMATION****MOTHER/GUARDIAN INFORMATION**

Name	Name
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Address	Address
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City/State/Country	City/State/Country
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ZIP/Postal Code	ZIP/Postal Code
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E-mail	E-mail
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Home Phone	Work Phone	Home Phone	Work Phone
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Father's Employer	Mother's employer
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Position	Position
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**FINANCIAL INFORMATION**

Name of person to whom bills should be sent:

Address

City/State/Country	ZIP/Postal Code
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Telephone	Fax	E-mail
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**REFERENCES** (Please list names and phone numbers of three references)

Name	Relationship	Telephone
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Name	Relationship	Telephone
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Name	Relationship	Telephone
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**SIGNATURES****X:**

**Signature of applicant** *(If admitted, I agree to abide by the rules and regulations of Platt College.) I do hereby certify that all statements made by me in this application are true and correct to the best of my knowledge. I understand that in the event that I have knowingly and willingly made any false statements my application for admission may be denied.*

Mail application to:	Admissions Department Platt College San Diego 6250 El Cajon Blvd. San Diego, CA 92115	For more information contact:	Admission Department 619.265.0107 • Toll-free 866.752.8826 Fax 619.308.0570 www.platt.edu
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Platt College reserves the right to contact any or all of the individuals listed on this form. Platt College does not discriminate on the basis of race, color, national origin, sex, handicap, or age in employment admissions, or any educational programs or activities.