

Manchester Community College

1066 Front Street, Manchester, NH 03102 | P: (603) 206-8160 | F: (603) 624-1576 | www.mccnh.edu/wdc | ManchesterWDC@ccsnh.edu

LNA Program Application for Admission

GENERAL INFORMATION

First Name _____ Middle Init. _____ Last Name _____

Date of Birth _____ Campus: ☐ MCC ☐ GBCC ☐ NHTI ☐ Nashua

Class Date: _____ or term ☐ Fall ☐ Winter ☐ Spring ☐ Summer

Email Address _____

Cell Phone _____ Other Phone _____

Street Address _____

City _____ State _____ Zip Code _____

Mailing Address *(if different)* _____ City _____ State _____ Zip _____

Are you a U.S. Citizen? ☐ Yes ☐ No If No, are you a permanent resident? ☐ Yes ☐ No

If you are not a legal resident, what is your current visa status? _____

NEW HAMPSHIRE RESIDENCE INFORMATION

I have always lived in New Hampshire ☐ Yes ☐ No

If No, and you live in NH, what month and year did you move to NH? _____

Ethnicity *(Optional)*: ☐ White ☐ Black ☐ Asian ☐ Am. Indian/Alaskan ☐ Hispanic

Gender *(optional)* ☐ Male ☐ Female

Emergency Contact Information

First Name _____ Last Name _____

Relationship _____ Phone _____ Other Phone _____

Why do you want to enroll in this program and become an LNA? *(write a paragraph or 2 here)*

***Please send a Resume' with this application or complete the school and job history section below:**

HIGH SCHOOL LAST ATTENDED (*This is informational only. A diploma or GED is not required*)

School _____ City _____ State _____

Country _____

Year of Graduation _____ Or Year of G.E.D/HiSET Award _____

COLLEGES PREVIOUSLY ATTENDED (*list all colleges you have attended*)

School Name	City	State	Dates Attended
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Previous Job	Dates	What did you do at this Job?
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1.

2.

3.

TO BE SIGNED BY ALL APPLICANTS

The information provided by the applicant on this admission application form shall be held confidential to the extent determined by Federal Law and College policy. Manchester Community College reserves the right to deny admission to any applicant who, in the judgment of the college officials, does not qualify for admission. The College also reserves the right to require withdrawal of any student who does not satisfy the ideals of citizenship, character, or scholarship.

In accordance with the terms and conditions set forth in its publications, and if accepted, I agree to abide by the rules and regulations set forth in the publications and in the Student Handbook, I also agree that the College has permissions to use any College sponsored pictures in which any likeness appears. I certify that I have read and agree with the above, and that all information provided herein is true and complete.

Signature of Applicant _____ Date _____

*For compliance purposes, the Community College System of New Hampshire and its Colleges collect names and social security numbers from all students attending the college. For example, the Internal Revenue Code requires the college to produce a 1098-T tax form. The college's use of social security numbers will be limited to legitimate educational purposes. The college will ensure the security of the student's social security number and will not disclose it to anyone outside the college, except as authorized by federal or state laws or applicable policies.

Return to: kmoore@ccsnh.edu LNA Program Coordinator, MCC /NHTI or ebussey@ccsnh.edu LNA Program Coordinator GBCC