



# Application for Admission

*Improving Life Through Learning*

## Quad-Cities Campus, Enrollment Services

6600 34th Avenue, Moline, IL 61265-5899  
309-796-5300 Toll Free: 800-334-1311  
Fax: 309-796-5209

## East Campus, Enrollment Services

26230 Black Hawk Road, Galva, IL 61434  
309-854-1703 Toll Free: 800-233-5671  
Fax: 309-856-6005

## PLEASE READ THIS CAREFULLY BEFORE COMPLETING YOUR APPLICATION

The Black Hawk College (BHC) admissions policy does not assure admittance of an individual student to a particular course or program. Some students may be required to enroll in specific courses, and others may be denied admission to a requested program because of space limitations. Persons under 18 years of age who have not completed high school must meet specific guidelines.

**There is a nonrefundable \$20.00 application fee for applicants who will be attending Black Hawk College while not attending high school at the same time. This fee must be paid prior to submission of this application.**

Tuition rates are determined by the LEGAL RESIDENCE of the student. Residence is defined as the place where the student lives and which is the student's true permanent home. Please consult the current BHC Catalog for specific residency information.

If you reside in Illinois, but not within the BHC District and you want to enroll in a program that your community college does not offer, you may receive partial payment of out-of-district tuition. To do this, you must submit a letter of authorization from the community college in your home district.

Students in need of financial assistance to attend Black Hawk College should contact the Financial Aid Office at 309-796-5400. Information on veteran's benefits may be obtained from the Veteran's Resource Center at 309-796-5501.

### **REQUIRED CREDENTIALS: High School or GED Transcripts:**

Students should check specific program requirements and athletic eligibility requirements to determine if the final high school transcript is required.

### **College Transcripts:**

An official transcript must be sent directly to BHC from all colleges attended if the applicant wants to use previous college course work for course placement or credit transfer. Evaluation of transfer credit will be conducted upon written request of the applicant.

### **Assessment:**

Before enrolling, applicants need to take an assessment test and complete orientation if planning to enroll in or accumulate six credit hours or more. Some classes require a specific test score prior to enrollment, and all students must meet the prerequisites for courses. Applicants should contact the Advising Center at 309-796-5100, Quad-Cities Campus, or 309-854-1709, East Campus.

### **Applicants for Health Career Programs Must Meet Additional Requirements.**

For information, please consult the BHC Catalog. Specific contacts for each program are given in the individual program descriptions.

### **International Students:**

Students who are not U.S. citizens or permanent residents must contact the International Student Program Coordinator. Please call 309-796-5183. Students for whom English is a second language must contact the English as a Second Language Coordinator and take the English as a Second Language placement tests.

### **myBHC:**

The college web portal at <http://mybhc.bhc.edu> provides a convenient way for students to access their ID number, personal e-mail account, course information, student records, registration, payment, financial information, special announcements and more.

### **Student ID:**

Students are assigned a BHC ID number. Use of this ID helps safeguard the confidentiality of your personal information. The ID number will assist you with obtaining available services at the college. A BHC photo ID is required.

### **Disability Accommodations:**

BHC is committed to making its services, programs and activities equally available to people with disabilities recognized by the Americans with Disabilities Act. Please call 309-796-5900 for more information.

Black Hawk College will make all educational and personnel decisions without regard to race, color, religion, gender, sexual orientation, marital status, national origin or ancestry, age, physical or mental disability unrelated to ability, or status as a disabled veteran or Vietnam era veteran, except as specifically exempted by law.

If you need an accommodation based on disability to fully participate in a program/event, please contact Disability Services at 309-796-5900. Please allow sufficient time to make arrangements.

Students, faculty and staff at BHC participate in a variety of activities designed to assess and improve student learning and to bring about institutional change. Examples of such activities may include placement testing, surveys, collecting random samples of student work, exit testing, and portfolio evaluation.

# CURRICULUM SELECTION GUIDE

## TRANSFER CURRICULA

designed for the student planning to transfer to a senior/four-year college or university with the objective of achieving a bachelor's degree.

### CODE CURRICULUM

- 1145 Associate in Arts
- 1245 Associate in Fine Arts
- 1645 Associate in Science
- 1619 Associate in Science – Ag Transfer

## CAREER CURRICULA

with selective admissions are listed below. Applicants should indicate the AAS/General Occupational and Technical Studies (GOTS) program (1111) as their desired program, because they will later apply to the appropriate college department for entrance into the program:

- Associate Degree Nursing (AAS), select code 1111
- Occupational Therapy Assistant (AAS), select code 1111
- Practical Nursing (certificate), select code 1111
- Physical Therapist Assistant (AAS), select code 1111
- Surgical Technology (AAS), select code 1111
- Veterinary Technology (AAS), select code 1111

## CAREER CURRICULA

are designed for the student planning to prepare for a specialized area leading to employment after completion of training. Some of the credits in the Career Curricula may be transferred to a senior/four-year college or university (based upon the institution's requirements).

CODE	CURRICULUM (2 years)	CODE	CURRICULUM (less than 2 years)	CODE	CURRICULUM (less than 2 years)
5467	Accounting	5729	A+ Prep Certificate*	5884	Manufacturing Processes Certificate
†9142	Agribusiness Management	5931	Accounting Clerk	5864	Medical Assisting Certificate
†9181	Agriculture Mechanics Technology	†5717	Advanced Large Animal Tech Certificate*	5684	Medical Coding Specialist Certificate
†9141	Agriculture Production Technology			5124	Music Industry Certificate
†9398	Automotive Repair Technology	†5817	Advanced Vet Office Management Certificate*	5656	Network+ Prep Certificate*
5435	Business			5689	Network Administrator Certificate
5378	Computer Information Technology	†9683	Agriculture Mechanics	5969	Patient Care Assistant Certificate
5651	Court Reporting Technology	†5613	Air Conditioning Specialist*	9798	Small Business Management Certificate*
5149	Criminal Justice Technology	†9541	Animal Science*	†9544	Swine Production*
5289	Cybersecurity	5761	Assistant Teacher Certificate	5855	Welding
5362	Early Childhood Education	5796	Auto CAD Certificate	5866	Welding – Gas Metal Arc*
5139	Emergency Medical Services – Paramedic	†5810	Automotive Repair	5870	Welding – Shielded Metal Arc*
		5566	Basic Nurse Assistant Training*	†5614	Wheel Alignment/Suspension
5187	Engineering Technology	†9543	Beef Production*	†5127	Veterinary Assisting
†9096	Equestrian Science	†5612	Brake Specialist*		
1111	General Occupational & Technical Studies	5868	Business Software*		
		5988	CNC Manufacturing Certificate		
5392	Health Information Management	5989	CNC Production Operator Certificate		
†9099	Horse Science Technology	5749	Criminal Justice Tech Certificate		
5173	Surgical Technology	5363	Early Childhood Educator Certificate		
†5017	Veterinary Technology	5640	EMT: Paramedic		
5458	Visual Communication	5782	Engineering Technology Fundamentals Certificate		
		5795	Financial Services		
		†9599	Horse Science Technology Certificate		
		5875	IT Support Technician Certificate		

If you are enrolling for one or several courses and do not intend to earn a degree or certificate, please choose a \*NDS (Non-degree-seeking) option:

- \*NDS-Tech/Industry – Welding, Manufacturing, Warehousing, Electrical, etc.
- \*NDS-Transfer – English, Speech, Art, Psychology, etc.
- \*NDS-VOC/Agriculture-Ag Mechanics, Ag Economics, etc.
- \*NDS-VOC Business/Office – Keyboarding, Word Processing, etc.
- \*NDS-VOC Health-Nursing Assistant Training, Health Information Management, etc.

† Major courses normally offered at the East Campus

\* Not eligible for most federal/state financial aid

College use only: Student ID \_\_\_\_\_ First term: \_\_\_\_\_

**\* ALL FIELDS ARE REQUIRED IN ORDER FOR APPLICATION TO BE PROCESSED.**

## APPLICANT INFORMATION

**Social Security number\*:** \_\_\_\_\_ **Date of birth\*:** \_\_\_\_\_  
(XXX-XX-XXXX) (Month) (Day) (Year)

**Name\*:** \_\_\_\_\_  
Last First Middle Initial Prefix Suffix

**Name under which you last attended if different from above:** \_\_\_\_\_

**Any other previous names:** \_\_\_\_\_

**I am planning to attend the\***  Quad-Cities Campus (Moline)  East Campus (Galva)

**First semester you plan to attend\*:**  Fall (begins August)  Spring (begins January)  Summer (begins June)

**Home address\*:**

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

County: \_\_\_\_\_ Nation: \_\_\_\_\_

Preferred Phone: \_\_\_\_\_  Home  Cell. Opt in for text communications?  Yes  No

E-mail address\* \_\_\_\_\_ (Please print clearly)

**The information collected in this section is used to comply with federal and state reporting requirements.**

**Legal Sex\*:**  Male  Female  Gender Neutral

**Please check status\*:**  Citizen of the U.S.  Permanent resident of the U.S.  
 Non-Citizen  Other

**Hispanic or Latino\*:**  Yes  No

**Racial Groups (select one or more) \*:**

- |  |  |
|--|--|
| <input type="checkbox"/> American Indian/Alaskan Native (20) | <input type="checkbox"/> Native Hawaiian/Pacific Islander (70) |
| <input type="checkbox"/> Asian (10)                          | <input type="checkbox"/> Middle Eastern or North African       |
| <input type="checkbox"/> Black or African American (30)      | <input type="checkbox"/> White (50)                            |

**Is English your primary language\*:**  Yes  No

**Are you a Single Parent? \***  Yes  No

A **single parent** (includes single pregnant women) is defined as an individual who is unmarried or legally separated from a spouse and has a minor child (or children), or is legal guardian of a child/children under the age of 18 years for which the parent either has custody or joint custody.

**Are you a Married Parent? \***  Yes  No

A **married parent** (includes married pregnant women) is defined as an individual that is a legally married parent or married legal guardian of a child (or children) who is under the age of 18 years.

**Are you an Out-of-Workforce Individual? \***  Yes  No

(displaced homemaker or works primarily without remuneration to care for a home and family, and for that reason has diminished marketable skills or parent whose youngest dependent child will become ineligible to receive assistance under part A of title IV of the Social Security Act not later than 2 years after the date on which the parent applies for assistance under such title or unemployed or underemployed and is experiencing difficulty in obtaining or upgrading employment)

**Do you consider yourself to be a Homeless Individual? \***  Yes  No

(lacks a fixed, regular, and adequate nighttime residence, including children and youths who are sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason; are living in motels, hotels, trailer parks, or camping grounds due to the lack of alternative adequate accommodations; are living in emergency or transitional shelters; are abandoned in hospitals; or are awaiting foster care placement; individuals who have a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings; individuals who are living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings; and migratory children (as such term is defined in section 1309 of the Elementary and Secondary Education Act of

1965) who qualify as homeless for the purposes of this subtitle because the children are living in circumstances described above.)

**Do you consider yourself to be a Student in Care? \*** Yes No

(any person, regardless of age, who is or was under the care and legal custody of the Department of Children and Family Services, including youth for whom the Department has court-ordered legal responsibility, youth who aged out of care at age 18 or older, or youth formerly under care who have been adopted and were the subject of an adoption assistance agreement or who have been placed in private guardianship and were the subject of a subsidized guardianship agreement.)

**Are you a youth IN or HAS AGED OUT of the Foster Care System? \*** Yes No

(The term foster care refers to the full-time substitute care of children outside their own home by people other than their biological or adoptive parents or legal guardians. Individual 21 or younger for whom the Illinois Department of Children and Family Services is currently or was previously legally responsible. This means an individual for whom the Department has (or had) temporary protective custody, custody or guardianship via court order, or a child whose parents have signed an adoptive surrender or voluntary placement agreement with the Department.)

**Did either of your parents graduate from a four-year college or university? \*** Yes No

**Would you like information about accommodations available to students with disabilities recognized by the ADA? \*** Yes No

**Are you a veteran or current member of the U.S. Armed Forces? \*** Yes No

**Are you the spouse or dependent child of a U.S. Armed Forces member or veteran? \*** Yes No

## HIGH SCHOOL INFORMATION

High school last attended\*: \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

\*Attended From Month: \_\_\_\_\_ \*Attended From Year: \_\_\_\_\_

\*Attended To Month: \_\_\_\_\_ \*Attended To Year: \_\_\_\_\_

Graduated? \*  Yes  No Graduation Date: Month \_\_\_\_\_ / Year \_\_\_\_\_

GED year (or anticipated date, if applicable) received\*: Month \_\_\_\_\_ / Year \_\_\_\_\_

Home school (If high school diploma was completed through a home school program): Month \_\_\_\_\_ / Year \_\_\_\_\_

## ADMISSION REQUIREMENTS FOR STUDENTS ENTERING TRANSFER (AA AND AS) DEGREE PROGRAMS

The Illinois Board of Higher Education has established the following high school course requirements for all students who graduated in May 1993 or later, who are entering Transfer (AA and AS) Degree Programs. Students are to fill in the number of years completed in each subject below. The "In Progress" box should be checked if currently enrolled in a course.

College Requirements (Years)	Coursework	High School Years Completed	In Progress
4	English		<input type="checkbox"/>
3	Mathematics		<input type="checkbox"/>
3	Social Studies		<input type="checkbox"/>
3	Science		<input type="checkbox"/>

**In total, how many semesters of Chemistry with a lab have you completed in high school and college?** \_\_\_\_\_

**Have you completed Chemistry courses in the last 5 years?**  Yes  No

**In total, how many semesters of Geometry have you completed in high school and college?** \_\_\_\_\_

**Did you take any BHC dual credit/enrollment courses before graduating from high school?**  Yes  No

College use only: Student ID \_\_\_\_\_ First term: \_\_\_\_\_

**\* ALL FIELDS ARE REQUIRED IN ORDER FOR APPLICATION TO BE PROCESSED.**

List all colleges previously attended:

Name of College	Location	Start Date	End Date	Degree

## PROGRAM OF STUDY

Using the Curriculum Selection Guide, write the name and code of the program you plan to enter at Black Hawk College.

Program Name: \_\_\_\_\_ Code: \_\_\_\_\_

### Primary Reason for attending BHC: (check one)

- |   |  |
|---|--|
| <input type="checkbox"/> 01 Prepare for new or first occupational skills            | <input type="checkbox"/> 05 Remedy basic skills deficiencies                 |
| <input type="checkbox"/> 02 Improve present occupational skills                     | <input type="checkbox"/> 06 Pursue non-career, personal interests            |
| <input type="checkbox"/> 03 Explore courses to decide on a career                   | <input type="checkbox"/> 07 Prepare for high school diploma equivalency test |
| <input type="checkbox"/> 04 Prepare for transfer to four-year college or university | <input type="checkbox"/> 08 Other or unknown                                 |

### EDUCATIONAL LEVEL THAT WILL BE COMPLETED WHEN YOU TAKE YOUR FIRST BHC COURSE: (check one)

- |   |   |
|---|---|
| <input type="checkbox"/> 29 Attending High School     | <input type="checkbox"/> 50 Bachelor's degree         |
| <input type="checkbox"/> 30 GED                       | <input type="checkbox"/> 60 Master's degree           |
| <input type="checkbox"/> 35 High school diploma       | <input type="checkbox"/> 70 First professional degree |
| <input type="checkbox"/> 39 Some college (not at BHC) | <input type="checkbox"/> 80 Doctorate degree          |
| <input type="checkbox"/> 40 Certificate               | <input type="checkbox"/> 85 Other                     |
| <input type="checkbox"/> 45 Associate degree          | <input type="checkbox"/> 90 None                      |

### Enrollment Objective

- R4 Complete an Associate Degree
- R3 Complete a certificate program
- R1 Complete one or several courses but not enrolling for the purpose of obtaining a degree or certificate

### PRESIDENTIAL SCHOLARS AWARD

A limited number of Presidential Scholars Awards (full tuition covered) are available to students. Presidential Scholars Awards are available to recent in-district high school graduates who graduate in the top 10% of their class. To receive consideration, this application and an official high school transcript showing your class rank after the 7th semester must be submitted by May 15th. Students graduating early after 3 1/2 years of high school may receive the award for the spring semester following graduation if this application and a 6th semester transcript is received by December 1st.

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## SIGNATURE & CERTIFICATION

I hereby certify that the information provided on this application is complete and accurate. I understand that if it is found to be otherwise, it is sufficient for rejection or dismissal from this College. I understand that a nonrefundable \$20.00 application fee must be paid prior to submission of application.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_