

ADMISSIONS AND RECORDS OFFICE

5055 Santa Teresa Blvd. Gilroy CA 95020 Phone 408.848.4735 • Fax 408.846.4940 • Website www.gavilan.edu

APPLICATION FOR ADMISSION

This application is to be completed by new students and those students who have been absent from Gavilan for two (2) or more semesters. Completed applications should be submitted to the Admissions and Records Office *at least ten (10) business days prior to registering for classes.*



Welcome to Gavilan College! Students and teaching are our top priorities. Whether you are preparing for transfer to a four-year college or university, seeking a degree or certificate, taking classes to improve skills or investigate a new career, we are pleased that you have chosen Gavilan.

PLEASE NOTE: To determine if your application has been processed yet, follow these instructions:

1. Wait at least 8 business days, and then go to https://my.gavilan.edu

2. Click on the "get your GAV ID" link.

3. Enter your last name and first name exactly as you indicated on the application

4. Enter your social security number (SSN)*

5. Enter your date of birth

RESULT: If your application has been processed, the next screen you see will indicate your Gavilan ID (G00******) and a temporary PIN. You may then login and set up your personal PIN and Hint question and answer.

If you are unable to arrive at the next screen

- A. Your application has not been processed yet, wait a day and try again OR
- B. You did not include a SSN on your application (go to the Admissions & Records Office for assistance) OR
- C. You did not type in your last name/first name exactly as it appears on your application—try again, (or go to the Admissions & Records Office for assistance).
- * A Social security number is required to login to MyGav. If you do not have, or do not wish to use, a social security number, you <u>must</u> go in person to the Admissions & Records office for assistance.

You may find transfer and completion rates for other California community colleges online at http://srtk.cccco.edu/index.asp.

Note: Dependents of service-connected disabled or service-connected deceased veterans may be eligible for a waiver of fees. Contact the Veterans Coordinator in the Office of Financial Aid on the Gavilan campus or your local County Veteran Service Office for information and assistance.

To Our Applicants: In compliance with the Student Right-to-Know and Campus Security Act of 1990 (Public Law 101-542) the annual Campus Security Report, transfer and completion rates are available on the college website at www.gavilan.edu/safety and www.gavilan.edu/research. Paper copies of the Campus Security Report are available upon request.

GAVILAN MAJORS

Use to complete #11 on the Gavilan College Application.

Degree/Certificate (currently offered)	СР	CA	AA	AS
Administration of Justice				
Law Enforcement Opt 1				
Law Enforcement Opt 2 (Police Acad.)				
Allied Health				
Nursing: Registered Nursing				
Art				
Aviation Maintenance Technology				
Airframe				
Powerplant				
Biological Science				
Biotechnology				
Business				
Accounting				
Business				
Business Computer Applications				
Computerized Accounting				
Economics				
General Office Skills				
Medical Office				
Real Estate				
Retail Management				
Carpentry Apprenticeship				-
Child Development		_		
Early Childhood Education				
Early Intervention Assistant				
Family Child Care				
School Age Child Care				
Span Lang Early Childhood Education		_		
Communication Studies				
Interpersonal Communication				
Computer Graphics & Design		_		
Adv. Technical Computer Graphics				
Comp. Graphic/Environ. Design				
Tech. Desktop Publish & Graphics				
Computer Science & Info. Systems		_		_
Business Computer Applications				
Comp. Prep for Bioinformatics				
Computer Hardware		_		
Computer Networking				
Computer Programming	_			
Programming for the Internet				
Scientific Programming				
UNIX Operating System				
Cosmetology				
Esthetician				-
Digital Media				
Digital Art & Imaging		-	-	

Degree/Certificate (currently offered)	СР	CA	AA	AS
Digital Audio/Video				
Interactive Media and Authoring				
Digital imaging/Graphics Prod.				
Digital Print Production				
Digital Video Editor Specialist				
Web Page Production Specialist				
Drywall/Lathing Apprenticeship				
English as a Second Language (ESL)				
ESL Intermediate Level				
ESL Advanced Level				
Engineering: see Physical Sci. & Engr.				
Fine Arts, General				
General Education				
CSU General Education Pattern				
IGETC				
Health Science				
Liberal Arts				
Administration of Justice				
Business				
Computer Science & Info. Systems				
Elementary Education				
Expressive Arts				
Language Arts & Humanities				
Natural Science				
Social Science				
Multiple Subjects				
Mathematics				
Media Arts				
Broadcast Television		•		
Journalism				
Music				
Philosophy				
Physical Education				
Education Option				
Sports Management Option				
Sports Medicine Option				
Physical Science & Engineering				
Physical Sci. & Engineering: Gen. Engr.				
Social Science				
Community Studies Emphasis				
Global Studies Emphasis				
Spanish				
Non-Native Spkr Opt. 1 2 3				
Native Speakers Option 4				
Theatre Arts		_		
Acting				
Technical Production				
Television Performance				
		-	-	

* Low unit CA is pending Chancellor's Office approval. If not approved a CP will be awarded.

CP-Certificate of Proficiency CC-Certificate of Completion CA-Certificate of Achievement AA-Associate of Arts Degree AS-Associate of Science Degree

PH Hawaiian PX Other Pacific Islander Item Item <th>AF</th> <th>PPLICATION for ADMISSION</th> <th>Spring</th> <th>Summer</th> <th>Fall</th> <th>20</th> <th>GAVILAN COLLEGE</th>	AF	PPLICATION for ADMISSION	Spring	Summer	Fall	20	GAVILAN COLLEGE	
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College: City State to City State	С	ollege:			Dates: from	1	to	
City State		-	City	State	Dates: from	1	to	
	0	· · · · · · · · · · · · · · · · · · ·	City	State			11/10-A&R	

STATEMENT OF LEGAL RESIDENCE

Name	Last	First	Middle Initi	al	Gavilan ID#			
Address								
		Street						
	City	State		Zip	_ Date of Bir	th		
	Ony	Oldio		210				
PART A	To Be Completed B	y All Applicants						
		lifornia for the past two ye	ears?					
	Yes If	you answered "Yes" and you	u are unmarried	d and under t	he age of 19, go	to Part B, otherwise, skip to	o Part D.	
	No If <u></u>	you answered " No ", complete	e the following:					
	Date pre	sent stay in California bega	n					
	• Do you i	ntend California to be your p	ermanent resid	ence?	Yes No)		
	• Did you	file California State Income T	ax for the last t	wo years?	Yes No)		
	 Are you 	a public school credentialed	employee?		Yes No)		
	 Are you 	a seasonal agricultural empl	oyee or depend	lent?	Yes No)		
	• Drivers L	icense or ID Card? Stat	e:	Date Is	sued:			
	 Register 		e:		egistered:			
	Vehicle F	Registration? Stat	e:	Date Is	sued:	_		
	Other Pr	oof of Residency in Californi	a				_	
		es lived in for the last two yea						
		State:			to			
		State:						
PART B	To Be Completed About Your Parents or Legal Guardian If You Are UNMARRIED and UNDER the AGE OF 19 I have lived continuously for the past two years with one or both of my parents and he/she/they have lived continuous for the past two years at the California address noted below:							
		Street		City		State		
	Yes If "	Yes", Check one: Both F	Parents	Mother	Fathe	er Legal Guardia	n	
		"No" and you wish to be about your parent(s	considered a	California r		÷		
		 Did they file California State 	e Income Tax th	ne last two ye	ears? Yes	No		
		 Do(es) he/she/they have an 	ny of the followi	ng?				
		Driver's License or ID card						
		 Vehicle Registration? Voter Registration? 	State: State:			red:		
		Other Proof of Residency in						
PART C	To Be Completed b	y Active Military Person	ıs, Depender	nts, or Vete	rans Discharg	ed Within the Last Year		
	 Are you a member of 	•	Yes No			Note:		
	 Are you a dependent When did your or you in California? 	of an active military person? r sponsor's tour begin	Yes No		must provide a	tary persons and/or dependent statement from the comman	nding	
	What is your state of I military records?	egal residence on			the assignment purposes. Depe	ne date of assignment and to to California is not for educa endents must also provide a	ational letter	
PART D	To Be Signed by Al	I Applicants				y are the dependent of a mili purposes of Federal Tax exer		
	determination of res	alty of perjury that the stat idency are true and corre College. I understand tha	ct. All materia	als submitte	ed by me for pu	irposes of admission bec	ome th	

residence may result in my dismissal from the College.



INTERCOLLEGIATE ATHLETICS INTEREST FORM

Gavilan College is a member institution of the California Community College Athletic Association and competes in the Coast Conference. If you have an interest in participating as a student-athlete, please complete the following information. A representative from the athletic department will contact you. You may also visit our website at www.gavilan.edu/athletics for more information.

Name				⊐ Male □ Female	Year & Term	
Address						
Home Phone			Cell Phone			
Email Address						
High School Attended					Year Graduated	
Other Colleges Attende	ed/Year					
I am interested in participating in the following intercollegiate sports at Gavilan College: Please mark all that apply: (M) indicates men's team; (W) indicates women's team.						
	□ Badminton (W) □ Cross Country (M) □ Golf (W) □ Swimming (M) □ Track & Field (M) □ Water Polo (M)	 □ Baseball □ Cross Country (W) □ Soccer (M) □ Swimming (W) □ Track & Field (W) □ Water Polo (W) 	 □ Basketball (N □ Football □ Soccer (W) □ Tennis (M) □ Volleyball (M □ Wrestling 		asketball (W) off (M) oftball ennis (W) olleyball (W)	

Gavilan College

Office of Admissions and Records 5055 Santa Teresa Blvd Gilroy CA 95020 www.gavilan.edu 408 848 4735 fax 408 846 4940

Educational Support Services for Students with Disabilities

If you would like to be contacted regarding supportive services complete this form and return it to the Disability Resource Center or the Admissions and Records Office at Gavilan College. For more information on available services, contact the Disability Resource Center at 408 848 4865.

Name				
Last		First	Middle	
Address				
Stre	et	City	State	Zip Code
			Phone	
Check any of the	e following that currently	apply:		
Deaf or				
Hard of	Acquired	Low Vision	Developmentally	Learning
Hearing	Injury	or Blind	Delayed Learner	Disability
	Other	Psychological		
	Physical	Impairment	Mobility	Other