El Camino College
ADN Admission Supporting Documentation Form

Applicant’s Name: __________________________________ Student I.D. # ___________________

Last Name            First Name

Attention – Please Print!

Applicant’s Acknowledgement
I acknowledge, by my signature below, that the information on this form is true and correct.

Print Applicant’s Name    Applicant’s Signature     Date

Criteria 4. First generation to attend college. Please briefly explain your situation or circumstances:

________________________________________________________________________________________________________________________________________

________________________________________________________________________________________________________________________________________

________________________________________________________________________________________________________________________________________

Criteria 4: Difficult personal and family situation/circumstances. Please briefly explain your situation/circumstances:

________________________________________________________________________________________________________________________________________

________________________________________________________________________________________________________________________________________

Criteria 5: Verification of proficiency in a foreign language. Please Print!
Please have a community member who has had adequate interaction with you and who can verify that you are proficient in a foreign language (individual may not be a relative).

I verify that _______________________________________________________ is able to speak, read and write in

_______________________________________________ at a level that allows common everyday communication.

Language

Please explain your relationship with the applicant:

Contact information for individual verifying language proficiency

Name:                      Phone:

Address:                   Email:

City, State, Zip

Signature (please do not use black ink)  Date

Applicant’s Acknowledgement
I acknowledge, by my signature below, that the information on this form is true and correct.

Print Applicant’s Name    Applicant’s Signature     Date