



Student Application

STUDENT INFORMATION:			
LAST NAME	FIRST NAME	MIDDLE INITIAL	
ADDRESS	CITY	STATE	ZIP CODE
DATE OF BIRTH	AGE	GENDER M F	
PHONE #	DAY PHONE #, IF DIFFERENT	SOCIAL SECURITY #	
DRIVER'S LICENSE #		E-MAIL ADDRESS	
MILITARY SERVICE (Branch)		DATES	
Honorable Discharge?		Yes	No
If no, explain:			

In case of an emergency, who should be contacted:			
NAME:			
ADDRESS	CITY	STATE	ZIP CODE
PHONE #:		RELATIONSHIP:	

NAME2:			
ADDRESS	CITY	STATE	ZIP CODE
PHONE #:		RELATIONSHIP:	

EDUCATION OF APPLICANT – List all schools attended, dates and/or certifications received:	
HIGH SCHOOL:	DATE
HIGH SCHOOL:	DATE
COLLEGE:	DATE
COLLEGE:	DATE
COLLEGE:	DATE
LICENSE AND/OR CERTIFICATION:	

EMPLOYMENT:		
Are you currently employed?	Yes	No
If yes, what is your current employment situation?		

What do you consider to be some of your strengths and skills?

EMPLOYMENT HISTORY:			
NAME	ADDRESS	POSITION	DATE (Start / End)

MEDICAL HISTORY:
Primary Physician:
Primary Physician Address:

Primary Physician Phone #		Date of last exam:		
What is your health now?	Poor	Fair	Good	Excellent
Are you currently being treated for any medical illness?		Yes	No	
If yes, explain:				
Are you currently receiving mental health services?		Yes	No	
If yes, explain:				
Were you ever restricted to “light duty” on the job?		Yes	No	
Have you ever left a job because of health problems?		Yes	No	
Were you ever treated by a doctor for job injuries?		Yes	No	

STATISTICAL DATA (collected for statistical reports):		
Please indicate Race or Ethnic Background:		
Please indicate your Federal Marital Status:		
Would you consider yourself socially disadvantaged?	Yes	No
Are you living with a relative?	Yes	No
Do you own the home at your address?	Yes	No
Is the home located on a farm?	Yes	No
Is the home where you live considered Heir Property?	Yes	No
Are other people living at your address?	Yes	No
If yes, name, age gender of others living at the address?	Age	Gender (M/F)
Name:		
Name:		
Name:		
Name:		
Name:		
Name:		
Name:		
Are you seeking home ownership?	Yes	No



Do you receive any type of financial assistance?	Yes	No
If answered "yes" to socially disadvantaged, explain:		
If answered "yes" to living with a relative, explain relationship:		
If answered "yes" to located on a farm, how many acres on the farm? _____ acres		
If answered "yes" to "Heir Property" please explain:		
If answered "yes" to financial assistance, please explain:		

Please note this application is for us to determine your acceptance into JennCole Design School. Once we have viewed all applications and decided who is accepted, you will then be notified of your acceptance. You do not have to call us nor send any messages to us please! We will contact you to let you know if you are accepted and what your next step is. If we have any questions about the information you have provided, we will contact you as well. Once you are accepted, if we find that you have lied about any of the info on this application you will automatically be disqualified, so please tell the truth.

Print Full Name

Student Signature

Date