



SUPPLEMENTAL APPLICATION FORM FOR BACHELOR DEGREE PROGRAMS

STUDENT INFORMATION (Please Print in Ink):

EDISON STUDENT ID#: _____ OR *SOCIAL SECURITY NUMBER: _____ - _____ - _____

LAST NAME FIRST NAME MIDDLE NAME MAIDEN NAME

MAILING ADDRESS CITY STATE ZIP

(_____) _____ (_____) _____ (_____) _____
HOME PHONE NUMBER WORK PHONE NUMBER EVENING PHONE NUMBER PRIMARY E-MAIL ADDRESS

SELECT DEGREE PROGRAM:

- | | |
|--|--|
| <input type="checkbox"/> B.A.S. Public Safety Administration | <input type="checkbox"/> B.S. Elementary Education |
| <input type="checkbox"/> B.S. Secondary Education Biology | <input type="checkbox"/> B.A.S. Supervision and Management |
| <input type="checkbox"/> B.S. Secondary Education Math | <input type="checkbox"/> B.S. Nursing |

SELECT TERM OF ADMISSION:

- | | |
|---|--|
| <input type="checkbox"/> FALL (August) Year _____ | <input type="checkbox"/> SUMMER A (May) Year _____ |
| <input type="checkbox"/> SPRING (January) Year _____ | <input type="checkbox"/> SUMMER B (June) Year _____ |

HAVE YOU PREVIOUSLY ATTENDED EDISON COLLEGE?

- YES If Yes, specify last term attended _____
If you were not enrolled at Edison State College within the last year, you need to submit a new Edison State College Admissions Application.
- NO If No, complete an Edison State College Admission Application in addition to this form.

DID YOU HAVE TWO YEARS OF A FOREIGN LANGUAGE IN HIGH SCHOOL?

- YES Send an official high school transcript to the Office of the Registrar at the address listed below.
- NO

PREVIOUS POSTSECONDARY EDUCATION:

List all colleges, universities, technical schools, etc. you have attended since high school. Official Transcripts must be requested and sent directly to **Office of the Registrar, Edison State College, 8099 College Parkway, Fort Myers, Florida 33906** from all institutions listed including official score reports from CLEP, DANTES, AP or IB.

NAME OF INSTITUTION	CITY/STATE	DATES OF ATTENDANCE	DEGREES EARNED

I certify that the information given in this application is complete and accurate, and I understand that to make false or fraudulent statements within this application or residence affidavit may result in disciplinary action, denial of admission, and invalidation of credits or degrees earned. If admitted, I hereby agree to abide by the policies of the Board of Trustees and rules and regulations of the College. I hereby authorize Edison State College to obtain student records electronically from any Florida school or college previously attended or any college placement test scores. I further agree to allow all my records to be electronically transferred to the institution of my choice.

Applicant Signature

Date

**Please submit this application to the Office of the Registrar, Edison State College, 8099 College Parkway, Fort Myers, Florida 33919
An Equal Access/Equal Opportunity Institution**

*This notice is intended for students, employees, and applicants. Edison State College collects your social security number for use in performance of the College's duties and responsibilities for the following possible purposes: classification of accounts; identification and verification; credit worthiness; billing and payments; data collection; reconciliation; tracking; benefit processing; tax and scholarship reporting; financial aid processing; accreditation of programs; and reporting to authorized agencies of the state and federal government. Social security numbers are also used as a unique numeric identifier in certain cases and may be used for research purposes. Federal law requires that we protect social security numbers from disclosure to unauthorized parties. Students and employees are assigned ESC identification numbers to assist in protecting their identities.