County College of Morris

Challenger Program Application

Admissions Office • 973-328-5100

Student Status:

- *New* Challenger students: submit this completed application, including the $30 non-refundable application fee, to the Admissions Office; make check payable to CCM.
- ***Current and former*** Challenger students: not necessary to reapply; just submit the completed *Challenger Registration Form* in-person to the Office of Records & Registration and pay the *tuition bill* at the Bursar's Office.

Office Use Only	❑ 0001 Challenger Program ❑ 0003 Academy Program ❑ 0004 12th Grade Initiative

1. Last Name _____ First Name _____ MI _____

2. Mailing Address: _____ Apt./Bldg. No.: _____

3. City: _____ State: _____ Zip Code: _____ County: _____

4. Home Phone: (_____)_____ **5.** Email address: _____

6. Cell Phone: (_____)_____ **7.** Social Security Number ***(required)***: _____-_____-_____

8. How long have you lived in NJ? _____ **9.** Birth Date ***(required)***: _____ Age: _____

10. Ethnic Code: (optional)

❑ 01. Black, Non-Hispanic
❑ 02. American Indian/Native American or Alaskan Native
❑ 03. Asian or Pacific Islander (India, China, etc.)
❑ 04. Latino/Hispanic
❑ 05. White, Non-Hispanic
❑ 06. Mexican
❑ 07. Puerto Rican
❑ 08. Cuban
❑ 09. Central or South American

11. Gender (optional): ❑ Male ❑ Female **12.** Applying for: ❑ Fall ❑ Winterim ❑ Spring ❑ Summer Year: _____

13. High School: _____ Expected Graduation Date: _____

14. Citizenship:

❑ U. S. Citizen
❑ Permanent Resident ***(must bring original Permanent Residency Card to the Admissions Office.)***
❑ Non-citizen, Employment Authorization ***(must bring Employment Authorization Card to the Admissions Office.)***
❑ Non-citizen, Visa Type _____ Expiration Date _____ ***(must bring Visa and I-94 Arrival/Departure Card to the Admissions Office.)***
❑ Non-U.S. citizen, non-green card holder

I certify to the best of my knowledge that the information is correct and that falsification of information may subject me to dismissal from college. I am aware that I may not register for classes without the permission of my parents and high school counselor.

Parental Authorization for Pre-College Age Students: Courses at the County College of Morris may contain subject matter that is not appropriate for some pre-college age students. I acknowledge this and understand that no adjustments will be made to course content or assignments because of the age and/or status of the student. I authorize my child identified above to enroll in the County College of Morris Challenger Program.

Applicant's Signature: _____ Date: _____

Guidance Counselor's Signature: _____ Date: _____

Parent or Guardian's Signature: _____ Date: _____

Person to contact in case of emergency: _____

Day Phone: (_____) _____ Evening Phone: (_____) _____

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