SWTJC
Southwest Texas Junior College

Vocational Nursing Program Admission Application

Instructions: Submit this admission form to the Vocational Nursing Department during the spring semester <u>prior</u> to the fall semester you want to enter the Vocational Nursing program.

Date_____ (mm/dd/yyyy) Applying for Fall 20_____

Name_____
Last First Middle Maiden

SS# or Student ID# Date of Birth_____/_____/_____

Mailing Address_____

City_____ State_____ Zip_____

Cell Phone_____ Alternative Phone_____

Email Address_____
Required Notice to Students: The email address that you provide to the Board is required in order to schedule fingerprinting for your criminal background check. The email address that you provide to the Board is subject to release to the public pursuant to the Texas Public Information Act.

The following questions regarding sex, age, and ethnicity are designed to demonstrate compliance with various federal and state statutes, regulations, and guidelines. These questions are to be answered on a voluntary basis, and your answers will be used for statistical purposes only.

GENDER
☐ Female
☐ Male

AGE
☐ 18 or under
☐ 19 - 25
☐ 26 - 35
☐ 36 - 45
☐ 46 - 59
☐ 60 or over

ETHNICITY
☐ White, not of Hispanic origin
☐ Black, not of Hispanic origin
☐ Hispanic
☐ Asian/Pacific Islander
☐ Native American
☐ International

Indicate the SWTJC location you want to attend in order of preference (1st, 2nd, 3rd).

_____ Del Rio

_____ Eagle Pass

_____ Uvalde

Email to: vavalerio@swtjc.edu OR
Mail to: Veronica Valerio
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Questions: (830) 591-7320