ADVANCED MANUFACTURING & INDUSTRIAL TECHNOLOGY

**Associate Degree**
Machine Tool Technology

**Certificate**
Advanced Welding Technologies
Commercial Refrigeration & Air Conditioning
Machine Tool Operations
Residential HVAC Service Technician

ARTS, SCIENCES & UNIVERSITY TRANSFER

**Associate Degree**
Associate in Arts
Business Transfer
Education Transfer

**Associate Degree**
Associate in Science
Civil Engineering Transfer
Health Science
Turfgrass Science

BUSINESS TECHNOLOGY

**Associate Degree**
Accounting
Administrative Office Technology
Business Administration
Marketing
Public Service Administration
Sports Tourism

**Certificate**
Administrative Support
Basic Business
Interior Design
Medical Administrative Assistant

CULINARY & HOSPITALITY

**Associate Degree**
Culinary Arts Technology
Hospitality Management

**Certificate**
Baking & Pastry Arts
Cake Design
Kitchen & Food Preparation Techniques
Professional Cooking

ENGINEERING TECHNOLOGY & INDUSTRIAL TECHNOLOGY

**Associate Degree**
Civil Engineering Technology
Construction Management Technology
Electronics Engineering Technology
General Engineering Technology

**Certificate**
Computer Aided Design
Electrical Lineman Technician
Robotics Technology
Surveying

HEALTH SCIENCE TECHNOLOGY

**Associate Degree**
Dental Hygiene
Emergency Medical Technology
Nursing ADN
Physical Therapist Assistant
Radiologic Technology

**Certificate**
Diagnostic Medical Sonography
Emergency Medical Technology
EMT - Paramedic
Medical Coding & Billing
Patient Care Medical Assistant
Pharmacy Technician
Phlebotomy
Surgical Technician

**Diploma**
Expanded Duty Dental Assisting
Nursing PN

INFORMATION TECHNOLOGY & DIGITAL ARTS

**Associate Degree**
Computer Technology
Networking
Programming

**Certificate**
Certified CISCO Networking Associate
Cybersecurity
Networking

NATURAL RESOURCES TECHNOLOGY

**Associate Degree**
Forestry Management Technology
Timber Harvesting
Urban Forestry
Wildlife Management
Golf & Sports Turf Management
Golf Course Management
Sports Turf Management

**Certificate**
Natural Resources & Environment

OCCUPATIONAL TECHNOLOGY

**Associate Degree**
Aviation Maintenance

PERSONAL SERVICES

**Certificate**
Cosmetology
Esthetics Technician
Massage Therapy

PUBLIC SERVICE TECHNOLOGY

**Associate Degree**
Criminal Justice Technology
Crime Scene Investigation
Homeland Security
Law Enforcement

Early Care & Education
Human Services
Paralegal/Legal Assistant

**Certificate**
Child Care Management
Early Childhood Development
Fire Science
Homicide Investigation
Latent Print Collection & Classification
Paralegal Specialist
Application for Readmission

This application is required of individuals that have previously attended HGTC and have not been enrolled during the past twelve months. This is necessary to reactivate current student status. Visiting students must complete this application each semester.

A non-refundable application fee of $30 is required with this application.

Please print in ink.

PERSONAL INFORMATION

H# (To be completed by HGTC staff):

Social Security No. _______ - _______ - _______ Date of Birth ___/ ____/ _____ Gender: ☐ Female ☐ Male

Name
(As it appears on Social Security card) Last First Middle Suffix

Former Name(s)
Include maiden name & any other name that your personal records may include

Mailing Address Street Address City State Zip

County (if within South Carolina)

Permanent Address
Include only if different from mailing Street Address City State Zip

Home Phone ( ) Work Phone ( ) Cell Phone ( )

Email Address

Ethnic Background: ☐ Black / African American ☐ Asian or Pacific Islander ☐ White, not of Hispanic origin
☐ Hispanic ☐ American Indian or Alaska Native ☐ Other

Emergency Contact Last First Middle Phone ( )

EDUCATIONAL BACKGROUND

The requirement of high school graduation/GED completion varies by program of study. However, for financial aid eligibility, proof of high school graduation/GED criteria must be met. See the current HGTC catalog available online at www.hgtc.edu for details.

High School Attended
High School (or Home School Association) City State

What is your current status?
☐ I have earned a high school diploma Date of graduation: ___/ ____/ ____
☐ I have earned a GED Date of graduation: ___/ ____/ ____
☐ I have not completed secondary education.

☐ I have received a certificate (or individualized diploma) Date of graduation: ___/ ____/ ____

Prior College(s) Attended:

<table>
<thead>
<tr>
<th>College / University Name</th>
<th>City, State</th>
<th>Dates Attended</th>
<th>Degree Earned</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>From To</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>From To</td>
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</tr>
<tr>
<td></td>
<td></td>
<td>From To</td>
<td></td>
</tr>
</tbody>
</table>

To receive transfer credits for previous course work request ALL official transcripts to be sent to HGTC Admissions, PO Box 261966, Conway SC 29528-6066 or emailed to transcripts@hgtc.edu. Credit expiration dates and transferability limits are listed in the current HGTC catalog, available online at www.hgtc.edu.
EDUCATIONAL PLANS

I am a:  
- Re-Admit Student - previously attended HGTC and has not been enrolled during the past 12 months. **Enrolling in the same major.**
- Internal Transfer Student – previously attended HGTC and has not been enrolled during the past 12 months. **Enrolling in a different major.**
- Visiting Student – previously attended HGTC and is visiting from another college/university for one semester.

I will begin (check one):  
- Fall semester (Aug. – Dec.)  
- Spring semester (Jan. – May)  
- Summer semester (May – Aug.)  
Year ________

Major: __________________________________________________________________________________________________________

I plan to:  
- Earn an Associate Degree  
- Earn a Diploma  
- Earn a Certificate  
- Transfer to a 4-year college (List institution if known)  
- Take classes for personal interest/other reason (no degree)

Some programs of study require background checks, urine drug screenings and/or immunizations as part of the admissions process. There will be additional fees for these requirements. Unsatisfactory results on the criminal background check or urine drug screenings or failure to complete any required health/immunizations standards WILL prevent enrollment or result in removal from enrollment in the program of study. Admission to any of the programs is conditional. A list of these programs can be found online at https://www.hgtc.edu/documents/admissions/general_forms/backgroundcheck.pdf.

CITIZENSHIP

You must complete the citizenship portion of the application.

Are you a Citizen of the U.S.?  
- Yes  
- No

Are you a Permanent Resident (possess a green card) in the USA?  
- Yes  
- No

If yes, you must provide your Permanenent Resident Card and State Issued ID to the Admissions Office for verification.

Are you a DACA student (Deferred Action for Childhood Arrivals)?  
- Yes  
- No

If yes, you must provide your DACA Card and State Issued ID to the Admissions Office for verification.

Are you an international student?  
- Yes  
- No

Are you here on a student Visa?  
- Yes  
- No

If yes, you must provide your US Visa and State Issued ID to the Admissions Office for verification.

What is your student Visa type? __________________________________________________________________________________________

Are you requesting an I-20 form?  
- Yes  
- No

Declaration of Citizenship or Legal Presence in the United States

The South Carolina Illegal Immigration Reform Act (S.C. Code Ann.§59-101-430 (Westlaw 2008)) prohibits those unlawfully present in the United States from attending a public institution of higher education in South Carolina and from receiving a public higher education benefit. By signing this statement you attest that you are a United States citizen, a legal permanent resident in the United States, or an alien lawfully present in the United States. In addition, the college may require you to submit documentation that supports your claim.

Any student providing false information may be subject to dismissal from the college. Any student who is found to be unlawfully present in the United States will be dismissed from the college.

_____________________________________________ (Print Name)  ___________________________(Date of Birth)

_____________________________________________ (Signature)  ___________________________(Date)

RESIDENCY

- You must complete the Residency portion of this application, the answers to these question will determine your residency classification for tuition purposes. Applicants who fail to complete all residency questions will be classified as non-residents and billed the out-of-state tuition rate.

- If you provide more than 50% of your financial support, you are considered INDEPENDENT and your residency claim is based upon your information.

- If someone else provides more than 50% of your financial support, you are considered DEPENDENT and your residency claim is based upon that person’s information.

- Please complete one of the Residency Forms on the next page.
### INDEPENDENT RESIDENCY INFORMATION

**Applicant:** If you provide more than 50% of your financial support, complete this INDEPENDENT residency form with your information.

Applicants who claim South Carolina residence for tuition and fee purposes must complete this form in its entirety.

**Additional information may be requested per SC Law 59-112. Residency requirements may be found online at [www.che.sc.gov](http://www.che.sc.gov).**

An INDEPENDENT student is defined as one who will provide more than half of his/her support for the 12 months immediately preceding his/her enrollment or re-enrollment and will NOT be claimed as a dependent or exemption on the income tax return of a parent, guardian or spouse.

<table>
<thead>
<tr>
<th>Section</th>
<th>Question</th>
<th>Options</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do you reside in South Carolina?</td>
<td>Q Yes Q No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If yes, provide the date present stay in South Carolina began.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do you reside in Horry or Georgetown County?</td>
<td>Q Yes Q No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If yes, provide the date present stay in Horry or Georgetown County began.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Who claims you for federal income tax purposes?</td>
<td>Q Self Q Both parents Q Father Q Mother Q Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Driver’s License?</td>
<td>Q Yes Q No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Driver’s License Number: ___________________________ State: ___________________________ Date Issued: ______________________</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vehicle Registration?</td>
<td>Q Yes Q No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>State: ___________________________ Date Issued: ______________________</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>New (first issued)</td>
<td>Renewed</td>
<td>Expiration Date: ___________________________</td>
<td></td>
</tr>
<tr>
<td>If you relocated to South Carolina, what was your previous state of residence?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### STUDENT’S / APPLICANT’S INFORMATION

- I hereby certify that the information I have provided on this application is complete and correct. I understand that falsification or failure to provide the correct information or omission of previous college attendance may lead to disqualification of my application for admission and immediate cancellation of registration at Horry Georgetown Technical College.
- I understand that this information will be used to determine South Carolina residency status for tuition and fee purposes.
- I understand that pursuant to the S.C. Family Privacy Act of 2002, my personal information is subject to public scrutiny or release.
- I understand that my image (photo or video) may be used by the college for marketing or instructional purposes in the normal course of college classes and activities.
- I understand that I am responsible for paying all charges and educational costs. I also understand that should the college deem it necessary to refer any unpaid expenses and/or interest to an attorney or collection agency that I am responsible for all cost of collection, including but not limited to attorney and collection agency fees.

**Signature__________________________ Date________________________**

### Statement of Equal Opportunity

Horry Georgetown Technical College shall not discriminate in employment or personnel decisions or in student admissions or in student decisions, or in all other segments of the College community on the basis of race, sex, age, national or ethnic origin, religion, disability, ancestry, political affiliation, marital status or unfavorable discharge from military service, in the educational programs and activities which it operates, and the College is prohibited from discrimination in such manner by applicable laws. Practices and requirements for nondiscrimination in such manner by applicable laws. Practices and requirements to enrollment of students in programs and activities of the College and employment by the College. Inquiries concerning the federal laws and their application to the College may be directed to the College’s Affirmative Action/Equal Opportunity Officer, the Associate Vice President for Human Resources and Employee Relations, U.S. Department of Health and Human Services or the U.S. Department.

### Student Right to Know and Campus Security Act

The Student Right to Know and Campus Security Act (Public Law 101-542), signed into law in November 1990 by the U.S. Department of Education, applies to institutions of higher education participating in federal financial assistance programs. Under this policy, current and prospective students must be informed of completion or graduation rates of students seeking certificates, diplomas or degrees. The act also requires reporting of security information and crime statistics to students, employees, and the U.S. Department of Education. Horry Georgetown Technical College, in compliance with Student Right to Know, provides current information on these topics at [www.hgtc.edu/righttoknow](http://www.hgtc.edu/righttoknow).

### State Authorization Reciprocity Agreement

Horry Georgetown Technical College is an approved member of the State Authorization Reciprocity Agreement (SARA). As a SARA member, HGTC adheres to an established set of standards for offering distance learning among SARA member states, districts and territories. Currently, HGTC does not offer online instruction within the following states: CA, CT, FL, KY, MA, NJ, NY, PA, UT and WI.
## DEPENDENT RESIDENCY INFORMATION

Applicant: If someone else provides more than 50% of your financial support, complete this DEPENDENT residency form with that person’s information.

Applicants who claim South Carolina residence for tuition and fee purposes must complete this form in its entirety. Additional information may be requested per SC Law 59-112. Residency requirements may be found online at [www.che.sc.gov](http://www.che.sc.gov).

A DEPENDENT student is defined as one who will receive more than half of his/her support for the 12 months immediately preceding his/her enrollment or re-enrollment from a parent, guardian or spouse and will be claimed as a dependent or exemption on that individual’s income tax returns.

### Student Information

| Name of Student: |  |  |
|-----------------|------------------|

Are you licensed to drive?  
- Yes  
- No

If yes, Driver’s License Number: ____________  
State: ______  
Date Issued: ______  
New (first issued)  
Renewed  
Expiration Date: ______/_____/______

With whom do you reside?  
- Self  
- Both Parents  
- Father  
- Mother  
- Other  

Who claims you for federal income tax purposes?  
- Self  
- Both Parents  
- Father  
- Mother  
- Other

Parents Marital Status:  
- Single/never married  
- Married  
- Divorced/separated  
- Widowed  
- Re-married

If parents are divorced or separated, who is the custodial parent?  
- Not applicable  
- Father  
- Mother  
- Shared custody

### Information of person who provides more than 50% of your financial support:

<table>
<thead>
<tr>
<th>First Name:</th>
<th>Last Name:</th>
<th>Relationship:</th>
</tr>
</thead>
</table>

Citizenship:  
- U.S. citizen  
- Not a U.S. Citizen or Permanent Resident

How long has your parent/guardian resided in South Carolina?  
- Years ______  
- Months ______

What is his/her address?  
[Street, City, State, Zip code]: _______________________________________

What is his/her driver’s license and vehicle registration information?:  

<table>
<thead>
<tr>
<th>License Number:</th>
<th>State:</th>
<th>Date Issued:</th>
<th>New (first issued)</th>
<th>Renewed</th>
<th>Expiration Date:</th>
</tr>
</thead>
</table>

Vehicle Registration State: ______  
Date Issued: ______  
New (first issued)  
Renewed  
Expiration Date: ______/_____/______

If your parent/guardian relocated to South Carolina, what was the previous state of residence?  
_________________________

What is his/her employment status?  
- Full-time  
- Part-time  
- Unemployed  
- Retired  
- Disabled

Employer Name: ___________________________________________  
Telephone: (_____) _______ ______

Employer Address: ________________________________________

Employment Dates: From (mm/yy) _________/ _________ To (mm/yy) _________/ _________

If his/her claim to South Carolina resident status is based upon active military assignment to the state, please submit a copy of current orders to the Office of Admissions.

Branch of Service:  
- USAF  
- USA  
- USN  
- USMC  
- USCG  
- Home of Record on L.E.S.: _______________________________________

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