# HGTC PROGRAMS

## Associate Degrees • Certificates • Diplomas

### ADVANCED MANUFACTURING & INDUSTRIAL TECHNOLOGIES

**Associate Degree**
- Machine Tool Technology
- Mechatronics Technology

**Certificate**
- Advanced Welding Technologies
- Commercial Refrigeration & Air Conditioning
- Diesel Engine Technology
- Machine Tool Operations
- Mechatronics
- Outboard Marine Technology
- Residential HVAC Service Technician
- Residential/Commercial Electrical Technician

### ARTS, SCIENCES & UNIVERSITY TRANSFER

**Associate in Art**
- Pre-Business Pathway
- Pre-Law Pathway
- Pre-Psychology Pathway

**Associate in Science**
- Pre-Engineering Pathway
- Pre-Marine Pathway
- Pre-Medicine Pathway
- Pre-Veterinary Nursing Pathway

**Certificate**
- University Studies

### BUSINESS ADMINISTRATION

**Associate Degree**
- Accounting
- Business Administration
  - Management Pathway
  - Hospitality Pathway
  - Marketing Pathway
  - Esthetics Pathway
  - Sports Tourism Pathway

**Certificate**
- Basic Business
- Customer Service Specialist
- Human Resources

### CULINARY ARTS TECHNOLOGY

**Associate Degree**
- Baking & Pastry Arts
- Culinary Arts Technology

**Certificate**
- Kitchen & Food Preparation Techniques
- Professional Cooking

### ENGINEERING TECHNOLOGY

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

**Certificate**
- Electrical Lineman Technician
- Robotics Technology
- Surveying

### GENERAL TECHNOLOGY

**Associate Degree**
- General Technology
  - Aviation Maintenance Path

### HEALTH SCIENCE TECHNOLOGY

**Associate Degree**
- Dental Hygiene
- Emergency Medical Technology
- Medical Laboratory Technician
- Nursing - ADN
- Occupational Therapy Assistant
- Physical Therapist Assistant
- Radiologic Technology
- Respiratory Care
- Surgical Technology

**Diploma**
- Nursing - PN

**Certificate**
- Computerized Axial Tomography
- Diagnostic Medical Sonography
- Emergency Medical Technology
  - Basic
  - Paramedic
- Expanded Duty Dental Assisting
- Health Care
- Medical Coding & Billing
- Nursing Assistant
- Patient Care Medical Assistant
- Phlebotomy
- Vascular Sonography

### INFORMATION TECHNOLOGY, DIGITAL ARTS & ADMINISTRATIVE OFFICE TECHNOLOGY

**Associate Degree**
- Computer Technology
- Cybersecurity
- Digital Arts
- Network System Management

**Certificate**
- Certified CISCO Networking Associate
- Cybersecurity
- Medical Administrative Assistant
- Networking

### NATURAL RESOURCES TECHNOLOGY

**Associate Degree**
- Forestry Management Technology
- Wildlife Management Path
- Golf & Sports Turf Management

### PERSONAL CARE & WELLNESS

**Certificate**
- Cosmetology
- Esthetics Technician
- Massage Therapy

### PUBLIC SERVICE TECHNOLOGY & LEGAL STUDIES

**Associate Degree**
- Criminal Justice Technology
  - Crime Scene Investigation Path
- Human Services
- Paralegal

**Certificate**
- Fire Science
- Paralegal Specialist
- Police Pre-Academy Training

### TEACHER EDUCATION

**Associate Degree**
- Early Care & Education
- Teacher Education

**Certificate**
- Early Childhood Development
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.

A non-refundable application fee of $25 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

Preferred Name ________________________________________________________________

Former Name ________________________________________________________________

Mailing Address Street Address City State Zip County (if within South Carolina) ____________________________

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

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

Email Address ____________________________________________

Are you Hispanic or Latino?  □ Yes □ No

Select one or more of the following races: □ Black / African American □ Asian or Pacific Islander □ White, not of Hispanic origin □ Hispanic □ American Indian or Alaska Native □ Other

Emergency Contact ____________________________________________ 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

I will earn or have earned (please select one):

□ High School Diploma Date of graduation: _____ / _____ / _____

□ Certificate or Individualized Diploma Date of graduation: _____ / _____ / _____

□ GED Date of graduation: _____ / _____ / _____

□ I will not complete Secondary Education, but I read at an 8th grade reading level.

□ I will not complete Secondary Education and do not read at an 8th grade reading level.

Please list any prior college(s) attended:

<table>
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<tr>
<th>College / University Name</th>
<th>City, State</th>
<th>Dates Attended</th>
<th>Degree Earned</th>
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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.

What is your citizenship status? (Please select one)
- US Citizen
- Permanent Resident (possess a green card)
  - If yes, you must provide your Permanent Resident Card and State Issued ID to the Admissions Office for verification.
- DACA (Deferred Action Childhood Arrival) or Non Resident with Employee Authorization card
  - If yes, you must provide your DACA Card and State Issued ID to the Admissions Office for verification.
- International
  - Do you currently have a Visa to study in the US?  
    - Yes  
    - No
  - If yes, you must provide your Student Visa 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 usually considered INDEPENDENT and your residency claim is based upon your information.
- If someone else provides more than 50% of your financial support, you are usually 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.

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.

Name of Student: __________________________________________________________________________________________________________________________________

Do you reside in South Carolina? □ Yes □ No
If yes, date present stay began. __________________________________________________________________________________________________________

Do you reside in Horry or Georgetown County? □ Yes □ No
If yes, date present stay began. __________________________________________________________________________________________________________

Who claims you for federal income tax purposes? □ Self □ Both parents □ Father □ Mother □ Other _______________________________________________________________________________________

Do you have a valid Driver’s License? □ Yes □ No If no, do you have a State Issued Identification Card? □ Yes □ No
If yes, Driver’s license Number: ______________________ Name: ______________________ State: ______ Date Issued: ______________________

□ New (first issued) □ Renewed □ Transferred from another state □ Expiration Date: ______________________

Do you have a vehicle registered in your name? □ Yes □ No
If yes, date present stay began. __________________________________________________________________________________________________________

State: ______ Date Issued: ______________________

If you relocated to South Carolina, what was your previous state of residence? __________________________________________________________________________

What is your employment status? □ Full-time □ Part-time □ Unemployed □ Retired □ Disabled
Employer Name: ___________________________________________________________________________________ Telephone: ( ________ ) ________________________
Employment Dates: From (mm/yy) _________/ _________ To (mm/yy) _________/ __________

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

Branch of Service: □ USAF □ USA □ USN □ USMC □ USCG
Home of Record on I.E.S.: __________________________________________________________________________

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.

I understand the FERPA Act of 1974 is a federal law that protects the privacy of and grants certain rights to my educational records. This law allows HGTC to share directory information, such as name, dates of attendance, and awards. Information is also used to publish honor list, commencement programs, and other student recognition programs.

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, color, sex, national or ethnic origin, age, religion, disability, marital or family status, veteran status, political ideas, sexual orientation, gender identity, or pregnancy, childbirth, or related medical conditions, including, but not limited to, lactation 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 extend to the enrollment of students in programs and activities of the College and employment by the College.

Employee and applicant inquiries concerning the federal laws and their application to the College may be directed to Jacqueline Snyder, Vice President, Human Resources and Employee Relations, Title IX Coordinator & the College’s Affirmative Action/Equal Opportunity Officer, Horry-Georgetown Technical College, PO Box 261766, Conway, SC 29528-6066, 843-349-5212, Jacqueline.Snyder@hgtc.edu.

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 policies 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.

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.
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.

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.

**Name of Student:** ______________________ Date of Birth: ______________________

**Are you licensed to drive?** □ Yes □ No

**If yes, Driver’s License or ID Number:** ______________________ **State:** ______________________ **Date Issued:** ______________________ **Expiration Date:** ______________________

**With whom do you reside?** □ Self □ Both Parents □ Father □ Mother □ Spouse □ Other ______________________

**Who claims you for federal income tax purposes?** □ Self □ Both Parents □ Father □ Mother □ Spouse □ Other ______________________

**Parents/Guardian Marital Status:** □ Single/never married □ Married □ Divorced/separated □ Widowed □ Remarried □ Not applicable ______________________

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

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

**First Name:** ___________________________________ **Last Name:** ___________________________________ **Relationship:** __________________________________

**If you reside with someone in South Carolina?** □ Yes □ No

**If yes, date present stay began:** ______________________

**What is his/her address? (Street, City, State, Zip code):** ______________________

**Does this person reside in South Carolina?** □ Yes □ No

**If yes, date present stay began:** ______________________

**Does this person reside in Horry or Georgetown County?** □ Yes □ No

**What is his/her address? (Street, City, State, Zip code):** ______________________

**Does this person have a valid Driver’s License?** □ Yes □ No

**If yes, Driver’s License Number:** ______________________ **State:** ______________________ **Date Issued:** ______________________ **Expiration Date:** ______________________

**Does this person have a vehicle registered in his/her name?** □ Yes □ No

**Vehicle Registration State:** ______________________ **Date Issued:** ______________________ **Renewed** □ **New Purchase Date:** ______________________ **Transfer from another state** □

**What is their employment status?** □ Full-time □ Part-time □ Unemployed □ Retired □ Disabled

**Employer Name:** ______________________ **Telephone:** ______________________

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

**If yes, Driver’s License or ID Number:** ______________________ **State:** ______________________ **Date Issued:** ______________________ **Expiration Date:** ______________________

**Does this person have a vehicle registered in his/her name?** □ Yes □ No

**Vehicle Registration State:** ______________________ **Date Issued:** ______________________ **Renewed** □ **New Purchase Date:** ______________________ **Transfer from another state** □

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

**Branch of Service:** □ USAF □ USA □ USN □ USMC □ USCG **Home of Record on L.E.S.:** ______________________

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