



Jump Start Program

27210 College Rd – Centralia, IL 62801 – (618) 545.3040 – www.kaskaskia.edu

Contact Information: Please contact Amy Troutt at 618.545.3048 or Fran Windler at 618.545.3049 with any questions you may have.
Application Information: Eligible students for the Fall and Spring semesters are those currently enrolled as a Freshman, Sophomore, Junior or Senior who attend a High School in the Kaskaskia College District. Eligible students for the Summer semester are those who have completed their Freshman, Sophomore or Junior year who attend a High School in the Kaskaskia College District. Any student who has graduated high school is not eligible. Tuition will be waived for half of the cost of up to four credit hours. Students will be responsible for all fees, textbook cost & half of the tuition. All information must be provided in order to process your form. **Deadline: Forms must be received by Noon the Friday before start of each semester.**

Legal Name: Last: _____ First: _____ Middle Int: _____	Social Security Number Required for 1098-T _____
Address: Street Address: _____ P O Box: _____ City: _____ State: _____ Zip: _____ Phone - Home: _____ Phone - Cell: _____ Email Address: _____	Birth Date: _____ Driv Lic No: _____ County of Residence: _____ Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male One of my parents has a bachelor's degree. <input type="checkbox"/> Yes <input type="checkbox"/> No

Ethnic/Race Information	National Citizenship <input type="checkbox"/> U.S. Citizen <input type="checkbox"/> Non-U.S. Citizen	Current Employment Status <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Homemaker <input type="checkbox"/> Unemployed <input type="checkbox"/> Other <input type="checkbox"/> No Response
<input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Yes <input type="checkbox"/> No Ethnic/Racial Background: <u>Choose all that apply:</u> <input type="checkbox"/> Asian <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Black or African American <input type="checkbox"/> White <input type="checkbox"/> Native Hawaiian/Pacific Islander Primary Race/Ethnic Group: <u>Identify with most:</u> <input type="checkbox"/> Asian <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Black or African American <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> White <input type="checkbox"/> Native Hawaiian/Pacific Islander	Community College Residency <input type="checkbox"/> In KC District <input type="checkbox"/> Out of KC District	
Current Student Intent <input type="checkbox"/> Personal interest/self development	High School Information: _____ Name of High School _____ City _____ Expected Graduation Year: _____	
Highest Diploma/Degree Earned <input type="checkbox"/> None	Course Registration Information - Major Code - BAC.0101.DUAL	
Enrollment Objective <input type="checkbox"/> To complete one of several courses, not pursuing a Degree or Certificate	1. Successful completion of GUID 103, Online Orientation, is required prior to enrollment in an online or hybrid course. If you request enrollment in an online/hybrid course and have not previously completed GUID103 you will be automatically enrolled in GUID 103 and instructions will be mailed to you. 2. Course information below must be completed prior to submission of form. *	
	Choose semester below. Separate form required for each semester of enrollment.	
	<input type="checkbox"/> Summer	<input type="checkbox"/> Fall <input type="checkbox"/> Spring
	*Course Prefix	*Course Number
	*Course Section	Credit Hours
	Total Hours	

Kaskaskia College does not discriminate on basis of age, race, color, national origin, religion, creed, political affiliation, belief or disability.

I understand that withholding information requested on this form, or giving false information, may make me ineligible for enrollment at Kaskaskia College or subject to dismissal. With this in mind, I certify by my signature, that the information on this form is correct and complete.

Signature: _____ Date: _____ Rev. 2.14.12

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Student Name: _____ High School Graduation Year: _____

Date of Birth or Student ID: _____

The above named student is currently a student at my high school and is capable of successful participation in the requested course.

High School Counselor: _____ Date: _____

My son/daughter has my permission to enroll in and participate in a college course(s) at Kaskaskia College. I understand that Kaskaskia College will pay half of the tuition up to four credit hours and that I will be required to pay the remainder of my child's tuition, all course fees, textbooks & other supplies required for the class(es). I have read and understand the requirements of Jump Start.

Parent or Legal Guardian: _____ Date: _____

I understand that I will conduct myself in a manner appropriate for a college course and will complete/participate in all of the requirements for the course. I have read and understand the requirements of the course I have selected. I have read and understand the requirements of Jump Start.

Student Signature: _____ Date: _____

Optional Section (This portion of the form must be signed in front of a Kaskaskia College official for the release to be valid.)

I, _____, authorize Kaskaskia College to release any and all information
(Please Print Your Name)
regarding my education at Kaskaskia College, including, but not limited to: grades, disciplinary issues,
schedules, attendance, and billings to _____.

(Please Print Name of Individual/Agency to Whom Information Can Be Released)

Kaskaskia College also is authorized to discuss any of the above items with

(Please Print Name of Individual/Agency to Whom Information Can Be Released)

I understand that this authorization excludes releasing the login and password information to computer/network systems owned by the College and that the only way to revoke this authorization is by submitting a written request to do so to the Director of Admissions and Registration at the address shown above.

Student Signature

Date of Birth

Student ID or SS#

Date

Witnessed by College Official

Date