

Whatcom Community College Short-term Program Application

Personal Information

Last Name/Family Name/Surname (as it appears on passport)		First Name/Given Name	Middle Name(s), if any	Age
Date of Birth (month/day/year)	Country of Birth	Gender Female Male	Country of Residence	Primary Language
Permanent Address (Street Address)		City	Province/State	
Zip/Postal Code	Country	Telephone (incl country/area codes)	Applicant's Email (Required)	

Emergency Contact (outside of the United States)

Last Name/Family Name/Surname	First Name/Given Name	Relationship to student	
E-mail	Daytime Telephone	Evening Telephone	

Allergies/Dietary Restrictions (if none, write none in Other)

Bee Allergy	Dust Allergy	Other	Nut Allergy	Vegan	Vegetarian	Other
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Physical Limitations (if none, write none in textbox and select No)

List anything that may limit your ability to participate in hikes, walks, water activities that we should be aware of.

Will you need accommodations for this physical limitation? Yes No

Certification of Accuracy, Authorization for Release of Information, and Photo Release

By signing below:

I certify that, to the best of my knowledge, all statements on this form are true. I understand that failure to submit complete and accurate information and all required documents may result in denial of admission to Whatcom Community College.

I authorize Whatcom Community College to release academic, immigration, and emergency information to my agent or school advisor.

I hereby give permission to Whatcom Community College to utilize photographs, video clips, and/or audio recordings in which I may be featured (with or without others) for class projects or recruitment materials which WCC may develop. I further will allow this material to become part of copyrighted work in the name of WCC or its designee for educational purposes. I understand that material developed may be used throughout the United States as well as other parts of the world. I assign my rights throughout the world to use, re-use, publish and republish, and otherwise reproduce, modify and display the same in whole or in part, individually or in conjunction with other photographs and/or video/audio recordings made for this purpose. I hereby release and discharge Whatcom Community College from any and all claims and demands arising out of, or in connection with, the use of the photographs and video footage, including and without limitation, any and all claims for libel or invasion of privacy.

Student Signature: _____ Date: _____
(If submitting electronically, your typed name will serve as a signature)

Notice of Non-Discrimination - WCC complies with federal and state laws specifically requiring that the College does not discriminate on the basis of race, color, national origin, religion, sex, disability, sexual orientation, or age in its program or activities.