



Returning Student Information:

Date Last Attended HCC: _____

This form is to be filled out by students who have attended HCC within the last 5 years and have been out of school for at least one term. ***If it has been more than 5 years since you attended HCC you will need to complete the full HCC application.**

Term & Year you plan to begin:		Fall ()	Spring ()	Summer ()	
STUDENT NAME (Last, First, Middle)			EMAIL ADDRESS:		
FORMER NAME (s)			SOCIAL SECURITY NUMBER OR HCC STUDENT ID #		
ADDRESS (No. Street, Apt.)			CITY, STATE, ZIP		
TELEPHONE:	DAYTIME OR WORK NUMBER:	EVENING OR HOME NUMBER:	CELL NUMBER:		
I am a U.S. citizen. If not please answer the question below: Are you a permanent resident? Circle one – non-resident alien – refugee/asylee			Yes _____ No _____	Yes _____ No _____	
Have you been a Minnesota resident for at least one year prior to completing this application? How long have you been a MN resident?			Yes _____ Years _____	No _____ Months _____	
Course of study or major:		Full time _____ Part time _____			
Have you attended any schools beyond high school?			Yes _____	No _____	
If yes, please request official transcripts from all other post-secondary institutions to be sent directly to the Admissions Office at HCC.					
Names of all colleges, universities, and/or institutes you have attended:	City/State	Dates Attended	Major	# of credits	Degree Earned
(Use back side of form if necessary for additional school listings.)					
STUDENT SIGNATURE (Required):				DATE:	

Section to be completed by student's Advisor:	
Does student have any holds? Yes _____ No _____	Ok to remove holds? Yes _____ No _____ Override _____
Advisor Signature: _____	Date: _____