



**MODESTO JUNIOR COLLEGE
NURSE ASSISTANT
Program Application**

Last Name	First Name	MI	other last names
Street Address	City	State	Zip
Date of Birth	Social security Number	Gender:	
Student Email Address <small>@my.yosemite.edu</small>	Personal Email	Phone	

Person to call in case of emergency:

Last Name	First Name	Relationship	Phone
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Ethnic Group: (response optional but appreciated)

- | | | |
|--------------------------------|----------|------------------------|
| American Indian/Alaskan Native | Anglo | Asian/Pacific Islander |
| Black/African American | Filipino | Hispanic |

Are you Bilingual? _____ If yes, what language(s)?

Is English your primary language? _____ If no, what is your primary language?

Have you ever been convicted by any court of a crime, other than a minor traffic violation?

If **Yes**, there is additional information available on the cdph.ca.gov website.

State Exam Requirements:

- By checking this box, I understand that in order to complete the state exam I must provide an original social security card, not copied or laminated.
- By checking this box, I also understand that in order to complete the state exam, if my address has changed it must be updated on my government issued ID. Or I must provide the DMV issued change of address card.

I certify under penalty of perjury that all information contained herein is correct, and understand that the penalty for submitting fraudulent information for acceptance into the program is immediate dismissal and withholding of grades.

Signature _____ Date _____