Instructions to the applicant : If you selected one of the following criteria in the prescreening enrollment criteria screen please select the criteria below.   You must submit supporting documentation as it indicates in the **Documentation Required** box. This document form along with your supporting documentation must be submitted with the online application cover page.

Applicant's Name *(print)*:_____   Student ID#_____

Check Box -Select Only One in **Criteria 5**	**Criteria 5 Categories** *Maximum 5 points*	**Documentation Required**
☐	**Disabilities** Students with **documented** physical, learning, communication, developmental, psychological and acquired brain injury disabilities, and other impairments. Students with disabilities who request reasonable accommodations are required to provide verification of their disability to the DRC.	Documented disability from SCC DSPS/Disability Resource Center (DRC)
☐	**Low family income** *(Eligibility for , or receipt of, financial aid under a program that may include, but not limited to, a fee waiver from the Board of Governors, the Cal Grant Program, the federal Pell Grant program or CalWORKs)*	Proof of eligibility or proof of receipt of financial aid e.g. BOGG fee waiver, Cal Grant, Pell Grant or other federal grant, CalWORKs, contact our Financial Aid office for further assistance.
☐	**First generation to attend college** *First generation college students are defined by the U.S. Department of Education as "Neither parent had more than a high school education."*	Paragraph explaining situation or circumstances.
☐	**Need to work** *(Need to work means student is working at least part-time while completing academic work that is prerequisite for the Nursing Program)*	Paycheck stub during period of time enrolled in prerequisite courses or letter from employer (must be on organization letterhead) verifying employment was at least part-time while completing prerequisite courses
☐	**Disadvantaged social or educational environment**	Participation or eligibility for Extended Opportunity Programs & Services (EOPS), contact our EOPS office for further assistance.
☐	**Difficult personal and family situation/circumstances**	Paragraph explaining situation or circumstances.
☐	**Refugee status**	Documentation or letter from United States Citizens and Immigration Services (USCIS)
Criteria 6	**Criteria 6 - Veteran Status- Maximum 5 points**	
☐	**Veteran status**	Copy of Defense Department Form DD-214, Honorable Discharge required. Explanation of Veteran status

ATTESTATION:

I_____ am claiming **one** Life Experiences or Special Circumstances for a total of 5 points and/or Veteran status *(only if applicable)* for additional 5 points toward my application to the Sacramento City College **ADN** Program. I have the required documentation for the selected criteria and will submit it with this form along with my online application cover page.

Student Signature_____ **Date**_____