

COLLEGE OF EASTERN IDAHO ADVANCED OPPORTUNITIES
TECHNICAL COMPETENCY CREDIT REQUEST FORM

(For office use only)
Pd. \$

***REQUIRED**

*Full Name: _____
Last *First* *Middle* *Other*

*Address: _____
Number and Street *City* *State* *Zip Code*

*Phone: _____ Cell Phone: _____

*Social Security Number: _____ *Gender: _____ *Date of Birth: _____

Ethnicity	Hispanic <input type="checkbox"/>	Non-Hispanic <input type="checkbox"/>
Race	White <input type="checkbox"/>	Asian <input type="checkbox"/>
	American Indian/Alaska Native <input type="checkbox"/>	Native Hawaiian/Pacific Islander <input type="checkbox"/>
	Black or African American <input type="checkbox"/>	

*High School: _____ *High School Grad Year: _____

CEI COURSES TO BE TRANSCRIPTED

Date of HS course completion	CEI Course #	CEI Course Name	# of Credits	Total Cost for Course	Date credit eligibility expires before transcribing
				= \$	
				= \$	
				= \$	
				Total \$	
				<i>(One Time Charge Only)</i>	

Payment Options:
By Mail: Check or Money Order Payable to College of Eastern Idaho
In Person: Cash / Check / Credit Card / Money Order
Note: Please do not include Credit Card payments by mail
No Fax or Email requests allowed

(March 2016 State Board of Education policy: Credits are granted by the postsecondary institution for which the agreement is with and are transcribed at the time the student enrolls at the postsecondary institution)

I hereby request a copy of my College of Eastern Idaho transcript for my personal records.

Signature: _____ **Date:** _____

Please return to: (To protect private student information - No Fax or Email requests allowed)
 College of Eastern Idaho
 Attn: Eloise Snell
 1600 S. 25th E.
 Idaho Falls, ID 83404

<i>(For office use only)</i>	
Date Transcript Request Received _____	Date Transcript Mailed _____
Date Money Received _____	Payment Type _____ Amount _____ POS# _____
Date to Registrar: _____	Date to Transcriptionist: _____
Checked CATEMA / Skillstack <input type="checkbox"/> _____	Revised 8.24.18

Steps for Admissions

1. Complete and turn in the **APPLICATION FOR ADMISSION**.
2. **Submit TRANSCRIPTS sent from last High School attended OR GED**
 - **MUST** be an official copy in sealed envelope or sent electronically directly from your school.
3. **Submit TRANSCRIPTS from ALL Colleges** previously attended
 - **MUST** be an official copy in sealed envelope or sent electronically directly from your school.
4. Submit placement scores, i.e. **SAT / ACT** if taken within the last 5 years.
5. **If there are no SAT / ACT scores or previous college credit that is applicable, take the GAIN placement test** — There is a \$15 non-refundable fee for the placement test that can be paid in the cashier's office. **CONTACT CEI TESTING CENTER to schedule an appointment to test** — **(208) 535-5438**, Rm 20, John O. Sessions Mechanical Bldg.

GAIN test is offered:

Monday 1-8 pm
Wednesday 8 am-8 pm
Friday 8 am-1 pm

REQUIRED AT TESTING:

- Copy of your receipt
- A valid Picture ID
- No calculator and no children

6. PROGRAM SPECIFIC TESTING

- Computer Literacy test is required for Computer Networking/CSEC/Web Development

For questions or to make an appointment with a **COUNSELOR**, call (208) 524-3000

- **Associate of Arts/Associate of Science (A.A. or A.S.)**
- Career Technical **Medical Programs**
- Career Technical **Non-Medical Programs**

* If you are **Undecided**, please contact Center for New Directions (208) 535-5363

To apply for **FINANCIAL AID** visit our website:

<http://cei.edu/financial-aid/financial-aid-explained/apply-for-financial-aid>

Financial Aid Priority Dates

- Fall Term: June 1
- Spring Term: November 1
- Summer Term: February 1