



IGA APPLICATION for ADMISSION

Mail to: Professional Golfers Career College
Admission Department
26109 Ynez Rd.
Temecula, CA 92591

INSERT
PICTURE
HERE

Campus Location:

Temecula, CA

Term of Entry:

Fall (Sept) _____

Spring (Jan) _____

Summer (May) _____

Applicant's full legal name: *(please print or type clearly in blue or black ink)*

FIRST (GIVEN) NAME

MIDDLE NAME

LAST (FAMILY) NAME

PREFERRED NAME (OR NICKNAME)

MAIDEN NAME

Social Security No. *(required for U.S. residents)*

Driver's License #

Birth date *(month/day/year)*

E-mail

Birthplace *(state, country)*

Male Female

Permanent home address

City/state

ZIP/postal code

Country

Telephone

Mailing address *(if different from above)*

City/state

ZIP/postal code

Country

Telephone

Citizenship

U.S. Citizen Permanent resident *(copy of green card required)*

Non - U.S. citizen; Visa type _____

Country of citizenship _____

If applying as an international student, will you be bringing dependents to the United States? Yes No

Is English your first language? Yes No

If not, what is your TOEFL Score? _____

Ethnicity

Caucasian African-American Asian Hispanic Other

Native American Pacific Islander Alaska Native

Are you currently employed? Yes No

Current employer _____

How did you hear about PGCC? _____

Golf Background

Current Handicap _____

Tournaments played _____

Tournaments won _____

Did you play on your high school golf team? Yes No

Continued on back

Education History

1. Name of high school

City/state

Date of graduation (month/day/year)

Are you currently attending, or have you previously attended, a college/university? Yes No (If yes, complete the information below)

2. Name of college attended

City/state

Dates attended (month/day/year) to (month/day/year)

Degree

Major

3. Name of college attended

City/state

Dates attended (month/day/year) to (month/day/year)

Degree

Major

Father/Guardian Information

Name

Address

City/state/country

Zip/postal code

Email

Home phone

Work phone

Father's Employer

Position

Mother/Guardian Information

Name

Address

City/state/country

Zip/postal code

Email

Home phone

Work phone

Mother's Employer

Position

Application Payment Method

A nonrefundable application fee of \$45 for domestic students, and \$75 for international students, is required for processing.

My U.S. check/money order for the application fee is enclosed, made payable to the Professional Golfers Career College.

I would like to charge the application fee to my (check one):

Visa MasterCard American Express Discover

Card No.

_____/_____
Expiration Date (month/year)

Cardholder's billing address

City/state/country

Name as it appears on the card

Authorizing signature

Have you previously applied to PGCC? Yes No

If yes, what term/year? _____

Have you ever been convicted of a felony? Yes No

Have you ever been expelled for academic or disciplinary reasons? Yes No

I affirm that the information on this application is complete and correct. If admitted, I agree to abide by the rules and regulations of the Professional Golfers Career College.

Signature of applicant

Date (month/day/year)