



Polk Community College

CPT Pre-Admission Information

<p style="text-align: center;">CPT INFORMATION</p> <ul style="list-style-type: none"> You must present an admission ticket and a photo ID for admittance to the placement test. No appointment is necessary. Test is computerized with no time limit. Allow at least two hours to complete the exam. Placement testing is not available on Sundays, major holidays, the college's winter and spring breaks, and the Saturdays between semesters. Your results are printed for you before you leave the testing center. Bring them to the Advising office for interpretation. <p style="text-align: center;">WHERE CAN I TAKE THE TEST?</p> <p>Winter Haven campus: The Teaching, Learning, Computing Center (TLCC) on the second floor of the Learning Resources building, room 205.</p> <p>Lakeland campus: The Teaching, Learning, Computing Center (TLCC) on the first floor of the Lakeland Learning Center, room 2150</p> <p style="text-align: center;">HOURS YOU MAY BEGIN TESTING:</p> <p>These are our normal operating hours. Hours may change during registration periods. Please call 863-297-1033 (WH) or 863-297-1044 (LK) for testing hours during registration.</p> <p>Monday – Thursday 8:00 a.m. - 7:00 p.m.</p> <p>Friday 8:00 a.m. - 2:00 p.m.</p> <p>Saturday 9:00 a.m. - 11:00 a.m.</p>	<p>We at PCC are thrilled that you are interested in starting your college career with us. After submitting this information to the Admission and Registrar's Office in Winter Haven or Lakeland, you can take the CPT(College Placement Exam). Please write legibly, sign this form, and submit it on either campus for your CPT ticket.</p> <p>Today's Date: _____</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">Last Name:</td> <td style="width: 33%;">First Name:</td> <td style="width: 33%;">Middle Name:</td> </tr> <tr> <td>High School:</td> <td colspan="2">Expected High School Graduation:</td> </tr> <tr> <td colspan="3">Home Address:</td> </tr> <tr> <td>City:</td> <td>State:</td> <td>Zip:</td> </tr> <tr> <td colspan="2">In what country is your citizenship?</td> <td>If non-US, indicate status:</td> </tr> <tr> <td colspan="2"></td> <td>Resident Alien Permanent Resident Alien Refugee VISA Student</td> </tr> <tr> <td>SSN:</td> <td>Date of Birth:</td> <td>Male or Female:</td> </tr> <tr> <td colspan="3">Email address:</td> </tr> <tr> <td colspan="2">Day phone:</td> <td>Evening phone:</td> </tr> <tr> <td colspan="3">Ethnicity: <i>Collected for use by the U.S. Office of Education as allowed by the title VI Civil Rights Act of 1964.</i></td> </tr> <tr> <td colspan="3" style="text-align: center;">Mark one in each column.</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;">White or Caucasian</td> <td style="text-align: center;"><input type="checkbox"/> Hispanic</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;">Black or African American</td> <td style="text-align: center;"><input type="checkbox"/> Non-Hispanic</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;">Asian or Pacific Islander</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;">American Indian</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;">Other</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Signature:</td> </tr> <tr> <td colspan="3" style="text-align: center;">_____</td> </tr> <tr> <td colspan="3">Student Signature</td> </tr> </table>	Last Name:	First Name:	Middle Name:	High School:	Expected High School Graduation:		Home Address:			City:	State:	Zip:	In what country is your citizenship?		If non-US, indicate status:			Resident Alien Permanent Resident Alien Refugee VISA Student	SSN:	Date of Birth:	Male or Female:	Email address:			Day phone:		Evening phone:	Ethnicity: <i>Collected for use by the U.S. Office of Education as allowed by the title VI Civil Rights Act of 1964.</i>			Mark one in each column.			<input type="checkbox"/>	White or Caucasian	<input type="checkbox"/> Hispanic	<input type="checkbox"/>	Black or African American	<input type="checkbox"/> Non-Hispanic	<input type="checkbox"/>	Asian or Pacific Islander	<input type="checkbox"/>	<input type="checkbox"/>	American Indian	<input type="checkbox"/>	<input type="checkbox"/>	Other	<input type="checkbox"/>	Signature:			_____			Student Signature		
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Visit our website at www.polk.edu for lots of additional admission and college information and help.