

ADMISSION REQUIREMENTS & APPLICATION PROCEDURES

Minimum Requirements

Age: All students applying for admission to the Bookkeeping Career Institute (BCI) must be at least 18 years old at the time of enrollment.

Non-Discrimination

Equal opportunity for admission and participation in the school's programs shall be extended to all persons regardless of race, color, religion, ethnicity, national origin, sex, marital status, height/weight ratio, disability, veteran status, sexual orientation, or age provided the minimum age requirement has been met.

Application Fee

There is a **\$30.00**, non-refundable fee to apply to the school. Full payment of the application fee must be submitted with the completed application.

Application Procedure

1. Complete the application form on the next two pages.
2. Attach a copy of valid ID (acceptable forms are listed on the application form).
3. Send completed application, copy of ID and application fee to the following address:

Bookkeeping Career Institute / Admissions
7150 SW Hampton St, Suite 201
Portland, OR 97223
Fax: 503-659-2186
Email: admissions@bookkeepingcareerinstitute.com

Incomplete applications or applications received without the required ID and/or fee will not be accepted.

APPLICATION FOR ADMISSION

Please print and use blue or black ink only.

First	Middle Initial	Last	
Street Address			
City		State	Zip
Phone		Cell Phone	
Email Address			

Date of Birth	/	/	Are you a U.S. Citizen?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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Which form of valid ID will you include with your application? (Copy required with application. Must be current; expired ID will not be accepted.) *Check One*

- U.S. Passport or U.S. Passport Card
 Driver's license
 ID card issued by federal, state or local government agency or entity, provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address

Previous Application/Attendance

- Have you ever applied to this school before? Yes No When? _____
 Have you ever attended this school before? Yes No
 Did you complete the program? Yes No
 If you did not complete the program, what was the reason? _____

Previous Education *(Not required. This information simply helps us get to know you better.)*

- High School _____
 Diploma Name of School City, State Year
 GED _____
 Year

Post-Secondary Education *Check all that apply.*

- | | |
|--|---|
| <input type="checkbox"/> Have not attended college | <input type="checkbox"/> Associate Degree |
| <input type="checkbox"/> Some college | <input type="checkbox"/> Bachelor Degree |
| <input type="checkbox"/> Certificate program at community college | <input type="checkbox"/> Master's Degree |
| <input type="checkbox"/> Private career school certification/diploma | <input type="checkbox"/> Doctorate or Professional Degree |
| <input type="checkbox"/> Apprenticeship training | <input type="checkbox"/> Other _____ |

List the name and location of the post-secondary institution(s) you attended.

Name of School / City, State	Year(s) Attended	Degree or Certificate
Name of School / City, State	Year(s) Attended	Degree or Certificate
Name of School / City, State	Year(s) Attended	Degree or Certificate

Related Experience (Not required to be admitted to the school.)

Do you have any prior accounting knowledge/experience? No Yes If yes, please describe.

I am pursuing admission for the following reason: (Choose one)

- Career Preparation and Employment Advanced Training / Continuing Education
 Personal Development / Self Improvement

I intend to enroll in the following course(s):

- Financial Accounting Fundamentals Payroll Accounting Fundamentals QuickBooks Fundamentals
 AIPB Certification Program

I certify that all statements on this application and accompanying documents are complete and true. I also understand that if I am admitted and do not enroll for the “start date” to which I am admitted, I may need to reapply for admission. I understand that submitted materials will not be returned or duplicated.

Signature: _____

Date: ____ / ____ / ____

A non-refundable \$30.00 application fee, payable to The Bookkeeping Career Institute must accompany your application. An applicant whose check is returned for insufficient funds will be charged an additional fee of \$15. No application is processed without payment of the application fee.

Right to Cancel: Applicants may cancel this transaction without penalty or obligation within 10 days of receipt of the application by The Bookkeeping Career Institute.

SCHOOL ADMINISTRATION USE ONLY

Date Application Received: ____ / ____ / ____ Assessment Test Date: ____ / ____ / ____

Amount Paid: \$ _____ Test Results: _____% Pass Fail

Payment Type: Credit Card Check Accepted Denied
 Cash Money Order

Valid ID Provided Notes: _____