

PASADENA CITY COLLEGE
Paralegal Studies Program Application
Winter 2019

All information given is kept strictly confidential

Please Print Clearly

Name:

Circle one:

Miss Mrs Ms Mr _____

LAST

FIRST

MI

Address:

Address

City

State

Zip Code

Phone #:

() _____ - _____

Student ID # _____

8-digit number

E-Mail Address: _____

1. Year of High School Graduation: _____ *OR* **Year GE Equivalency Completed:** _____

2. Do you currently hold a degree from PCC? _____ **If so, please check which one(s):** AS AA

Do you currently hold a degree from another institution? _____

If so, what *degree(s)*, and from what institution(s)?

AS AA BA BS MA MS

From: _____

JD PhD

3. Have you completed this Program Application form in any previous semester?

No Yes in _____
 Semester/Year

4. I am currently a Part time student Full time student

5. All *Paralegal* classes currently enrolled in at PCC:

(Please do not include Business 12A or 12B classes)

Legal Course #:

Time/Day(s) of Classes:

Instructor:

Plgl 134 _____

Plgl _____

Plgl _____

Plgl _____

Plgl _____

PLEASE SEE OVER 

**Pasadena City College
Paralegal Studies Program Application
Fall 2018**

6. Goal:

a. Choose **ONE**:

Paralegal Studies Certificate of Achievement (*only*)

or

Associate of Science Degree in Paralegal Studies (this *includes* the Certificate)

or:

Self Improvement (*no certificate or degree*)

b. Please *estimate* the school-year that you will complete the *certificate* portion of the program:

⇒ **Example:** 2014-15

20 _____ - _____

7. Are you currently employed in the *Legal* field? Yes
 No

If yes: Part-time

Full-time

Employer Name/Address/Phone #:

() _____ - _____