



EL CAMINO COLLEGE COMMUNITY COLLEGE DISTRICT

16007 Crenshaw Boulevard, Torrance, California 90506-0001

Telephone (310) 532-3670 or 1-866-ELCAMINO

www.elcamino.edu

Dear Parent,

Your son/daughter _____ is enrolling in an El Camino College course at their local high school. Through a close partnership with El Camino College, your student has the opportunity to articulate college credit or enroll in college classes for free.

The following information is needed during the online enrollment process in class:

- **Preferred Mailing Address** (PO Boxes are ok)

Address: _____

City: _____ State: _____ Zip: _____

- **Social Security Number**

____-____-____-____

- **Citizenship Status** (If applicable)

If your student is a non-US Citizen, please provide the following information:

Alien Registration Number: _____

or

Visa Type: _____ Issue Date: _____ Expiration Date: _____

- **Military Status** (If applicable)

If a student's parent is serving on *active duty*, please provide:

1. Military Member's State of Legal Residency (military): _____

2. Military Member's Home of Record: _____

If a student's parent is a *military veteran*, please complete numbers 1 and 2 above as well as the discharge information below:

Date of Discharge: _____ Type of Discharge: _____

NOTE: This paper will be collected from your student and shredded upon completion of the online application. If you would like this form returned to your student to dispose of personally, please indicate so here: ☐

Questions/Concerns? Contact the Career Pathways Office:

Megan Ruane, mruane@elcamino.edu or 310.660.3593 ext. 7780

Tiffany Miller, tsmiller@elcamino.edu or 310- 660- 3589