



WEST HILLS COLLEGE LEMOORE

Assoc. Degree of Nursing LVN-RN Program Nurse Assistant Medical Assistant Paramedic Program

Student Demographics Sheet

Name: _____

Social Security # _____ WHCL ID# _____

Primary Language: _____ Additional Languages: _____

Birth date: _____

Date Entered Program: _____ Date Expect to Graduate: _____

1. Age: (a) 18-25 (b) 26-35 (c) 36-45 (d) 46-55 (e) >56 (f) Info not available

2. Ethnic Background: (a) Native American (b) Asian or Pacific Islander
(c) African American (d) Filipino (e) Hispanic (ab) White, non Hispanic (ac) Other
(ad) Unknown

3. ESL (English as a Second Language)? _____ Yes _____ No

4. Gender: Male _____ (a) Female _____ (b)

5. Do you receive financial aid? Yes ___ (a) No ___ (b)

Type (BOGG waiver, Workforce, etc.) _____

6. Are you currently employed? _____ Yes _____ No Where? _____

FOR OFFICE USE ONLY

TEAS VERSION: _____ Date Taken: _____ Adj. Score: _____%

Rdg _____% Math _____% Science _____% English _____%

Prerequisite GPA: _____

Cumulative GPA: _____

Total Points: _____

Start Date: _____ Cohort: Class of _____