



Lakeland
Community College

7700 Clocktower Drive, Kirtland, Ohio 44094-5198 Student Accommodation Center

Student Information Form

Date _____

Name _____

Lakeland ID# _____

Address _____

Telephone Number (_____) _____

City, State, Zip _____

Date of Birth _____

Sex - (circle one) F M _____

High School Attended _____

Have you applied at Lakeland? - (circle one) Y N

Date of H. S. Graduation _____

College Major _____

Plan to attend Lakeland - (circle one) Full Time Part Time

Employment Status - (circle one) Full Time Part Time N/A

Hours worked per week _____

Description of your disability: _____

For office use only:

Date _____

Verified disability:

Stated barriers/concerns:

History of accommodations:

Reason for attending:

Completed: Y/N

Compass/Asset: English: _____ Math: _____

Notes: