



Undergraduate Application for Readmission

Previously enrolled undergraduates who wish to return to The College at Brockport to complete their baccalaureate degree requirements should complete this application for readmission. Students who have only attended Brockport as non-matriculated students should apply for transfer admission using the SUNY application for admission. Students readmitted to the College must meet requirements in effect as of the date of readmission. Please print or type all information clearly.

Personal Information

1) Name: _____
Last Name First Name Middle Name Maiden Name (if applicable)

If you have academic records under another name, please give your former name(s): _____

2) Social Security Number: _____/_____/_____ 3) Date of Birth: _____/_____/_____
mm dd yr

4) Permanent Address:

Street _____

City _____ State _____ Zip Code _____ County _____

5) Daytime Phone: (____)_____ Home Phone: (____)_____ Cell Phone: (____)_____

6) E-mail Address: _____

7) Are you a United States citizen? ___ Yes ___ No If no, visa type: _____

8) Has your New York State residency changed since you last attended The College at Brockport? ___ Yes ___ No

If yes, please explain. _____

9) Optional: How would you describe yourself?

a.) ___ White, non-Hispanic ___ Black, non-Hispanic ___ American Indian/Native Alaskan
___ Hispanic/Latino ___ Asian or Pacific Islander ___ Not Listed

b.) If Hispanic/Latino, is your background (select one):

Dominican Mexican Puerto Rican Central American South American Other Hispanic/Latino

Academic Information

10) Semester and year applying for readmission: Fall 20_____ Spring 20_____

11) Intended academic major at The College at Brockport: _____

a) Specific concentration within major (if applicable): _____

b) Do you plan to apply for a teacher certification program? If yes, please indicate which:

Please note the Childhood and Adolescent Education Certification Programs, Nursing Program, and Social Work Program require a secondary application with specific admission requirements and deadlines. Students wishing to gain entrance to such programs will need to complete the secondary application in addition to gaining readmission to the College.

12) What was your last date of attendance at The College at Brockport? _____

13) Were you a student in the EOP Program? ___ Yes ___ No

14) Do you plan to enroll ___ Full-time (12 credits or more) or ___ Part-time (Up to 11 credits)

15) Are you interested in on-campus housing? ___ Yes ___ No

16) Did you attend other colleges/universities prior to attending The College at Brockport? ___ Yes ___ No

If yes, please list all colleges/universities attended and dates of attendance. If you have not attended Brockport within five (5) years you should submit official transcripts from all schools attended. You may attach additional pages if necessary.

Name of institution: _____

Dates of attendance: _____ Credit hours completed: _____ Estimated GPA: _____

Name of institution: _____

Dates of attendance: _____ Credit hours completed: _____ Estimated GPA: _____

17) Did you attend other colleges/universities since leaving The College at Brockport? Yes No

If yes, please list all educational institutions you've attended and dates of attendance. Official transcripts are required from each institution listed before an admissions decision will be made on your application. Failure to list all educational institutions attended since leaving The College at Brockport may be grounds for dismissal from the College. You may attach additional pages if necessary.

Name of institution: _____

Dates of attendance: _____ Credit hours completed: _____ Estimated GPA: _____

Name of institution: _____

Dates of attendance: _____ Credit hours completed: _____ Estimated GPA: _____

18) Have you ever been convicted of a felony? Yes No

19) Have you been dismissed/suspended from any college/university for disciplinary reasons? Yes No

20) Were you academically dismissed from The College at Brockport? Yes No

If you answered yes to question # 18, #19 or #20 you are required to attach a letter of explanation and may be required to sign a release form allowing The College at Brockport to obtain additional information. In as much detail as possible, let the Admissions Committee know the circumstances that led to the above noted situation, what factors have changed in your life and/or what factors are currently in place that will enable you to now be successful at The College at Brockport.

21) Do you plan to complete your remaining degree requirements at The College at Brockport? Yes No

If yes, please sign below. If no, read the following statements and sign below.

22) When do you plan on graduating from The College at Brockport? _____

Information on Readmission for Graduation Purposes Only

- a) Students planning on completing coursework for their degree at another college/university should apply for readmission to The College at Brockport before attempting to complete remaining coursework. The Office of Registration and Records will provide the student with a pre-graduation evaluation to determine remaining degree requirements. These students are readmitted for graduation purposes and are required to meet degree requirements in effect as of the date of readmission back to The College at Brockport.
- b) The College Residency Policy requires that a minimum of 30 credits be completed at The College at Brockport. The residency requirement includes completion of at least 15 credits needed for a major. If you are pursuing a minor or certification program, then you must complete at least half of those credits required for the minor/certification program at Brockport.
- c) Written approval — using the *Course Approval Form* — is required prior to enrolling in remaining courses at another college/university to ensure transfer of credits.
- d) In order to complete your remaining course(s) at another college/university, your Brockport cumulative GPA and major GPA must be a 2.0 or better, you must have fewer than 12 outstanding credits and be able to complete all degree requirements within one year of readmission.
- e) College/university transcript(s) must be sent to The College at Brockport Office of Undergraduate Admissions following the completion of your coursework at another college/university.
- f) If you have or will complete your remaining credits at another college/university, please indicate the school name and semester in which you were/will be enrolled: _____.

Admission to The College at Brockport is based on the qualifications of the applicant without regard to race/ethnicity, color, gender, sexual orientation, religion, national origin, age, disability, marital status, or veteran status. I understand that this application cannot be processed if it has not been completed according to instructions and that any deliberate falsification or omission of data may result in denial of admission or dismissal. All information submitted is true to the best of my knowledge.

Signature (required)

Date

Please return this application along with the \$50 non-refundable application fee to:

Office of Undergraduate Admissions

The College at Brockport

350 New Campus Drive

Brockport, NY 14420-2915



Please make payment payable to "SUNY College at Brockport"