



## Application for Visiting Student Program

### Personal Information

- 1) Name: \_\_\_\_\_  
Last Name                      First Name                      Middle Name                      Maiden Name ( if applicable )
- 2) Social Security Number: XXX-XX-\_\_\_\_\_
- 3) Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  
                         mm                      dd                      yr
- 4) Sex: \_\_\_ F \_\_\_ M
- 5) College Address: \_\_\_\_\_  
   Street / apt. or dorm or PO box & college  
 \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_  
   City                      State                      Zip code                      Phone
- 6) Home address: \_\_\_\_\_  
   Street/apt  
 \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_  
   City                      State                      Zip code                      Phone
- 7) Are you a New York state resident? \_\_\_ Yes \_\_\_ No
- 8) Are you a United States citizen? \_\_\_ Yes \_\_\_ No If no, visa type: \_\_\_\_\_
- 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) Institution I am presently attending: \_\_\_\_\_
- 11) Institution I wish to attend as a visiting student: \_\_\_\_\_
- 12) Year and semester(s) I wish to visit: \_\_\_\_\_
- 13) Major area of study: \_\_\_\_\_
- 14) Program areas in which I propose to take courses during my visit. (If possible, please specify courses you wish to take and their numbers from the The College at Brockport catalog).  
 \_\_\_\_\_
- 15) Will you be taking courses at Brockport or participating in an overseas study program?  
Brockport                      Overseas Program/Which Program? \_\_\_\_\_
- 16) I will be seeking campus housing during my visit. \_\_\_ Yes \_\_\_ No

- 17) I will be seeking financial aid for the visiting period.      Yes      No
- 18) Have you ever been dismissed from a college for disciplinary reasons?      Yes      No

19) Signature of student's academic or departmental advisor at the home institution:

I have reviewed and approve of the proposed program of study for the visiting period. I have agreed with the student that work completed during the visiting period will be counted toward the degree at the home institution under the following conditions:

---

---

---

Advisor's Signature \_\_\_\_\_

Advisor's Name ( Please print) \_\_\_\_\_

Title and Department: \_\_\_\_\_

Institution: \_\_\_\_\_

Date: \_\_\_\_\_

20) Signature of student:

*I understand that my acceptance at the college named on this application depends upon space availability at the institution. I also understand that I, personally, will be responsible for the tuition, fees and charges prevailing at that institution, and I agree to be bound by all rules and regulations of the host college. I have requested that a copy of my transcript be sent to the Visiting Student Program (VSP) coordinator at the institution I am applying to visit.*

Student's Signature: \_\_\_\_\_

21) Signature of Registrar from home institution:

I certify that \_\_\_\_\_ is a  
Student's name

\_\_\_\_\_ in good academic and disciplinary standing.  
term and year (e.g.: first semester junior)

Registrar's Signature: \_\_\_\_\_

Registrar's Name (Please print): \_\_\_\_\_

Date: \_\_\_\_\_

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.