

The State University of New York at Fredonia

Extended Learning
2146 Fenton Hall
Fredonia, New York 14063

**Application for Admission to Undergraduate
Continuing Education Credit Study**

NAME: _____
LAST FIRST MIDDLE

ADDRESS: _____
STREET # STREET CITY STATE ZIP CODE COUNTY

FREDONIA ID (if applicable): _____ TELEPHONE: () _____ E-MAIL ADDRESS: _____

If you have academic records under another name, please indicate: _____
FORMER LAST FORMER FIRST

Are you a New York Resident? Yes No If a NY resident, for how long? _____

Are you a United States Citizen? Yes No If no, your country of citizenship is? _____

Response to this section on race and ethnicity is voluntary. Please check the appropriate box:
White/non-Hispanic Black/non-Hispanic Hispanic /Latino
Asian or Pacific Islander American Indian/ Native Alaskan Not Listed Here

DATE OF BIRTH: _____ GENDER: Male Female VETERAN: Yes No
MONTH/DAY/YEAR

HIGH SCHOOL: _____ GRADUATION DATE: _____
NAME CITY STATE

GED: _____
STATE EXAM ADMINISTERED SCORE YEAR

Have you been dismissed and/or suspended from a college for disciplinary reasons? Yes No

Have you previously applied to The State University of New York at Fredonia? Yes No

Have you previously been admitted to The State University of New York at Fredonia? Yes No

Dates of Attendance: _____ Number of Credits Earned: _____ Degree(s) Earned: _____ GPA: _____

List all other colleges and/or universities attended:

Name of College (Please provide an official transcript for each)	Dates of Attendance	Number of Credits Earned	Degree(s) Earned	Grade Point Average

When do you wish to begin studies at Fredonia? Fall J-Term Spring Summer Year _____

Do you eventually plan to apply for degree status? Yes No Undecided

Please state reason(s) why you are applying for Continuing Education Undergraduate Credit Study and list course(s) of interest:

Admission to The State University of New York at Fredonia is based on the qualifications of applicant without regard to an individual's race, color, national origin, religion, creed, age, disability, sex, gender identity, sexual orientation, familial status, pregnancy, predisposing genetic characteristics, military status, domestic violence victim status, or criminal conviction. The authority to collect personal information is based on Section 355 (2) (h) of the New York Education Law.

State University of New York (SUNY) policy prohibits SUNY Fredonia admission applications from inquiring into an applicant's prior criminal history. After acceptance, the College shall inquire if the student previously has been convicted of a felony if such individual seeks campus housing or participation in clinical or field experiences, internships or study abroad programs. The information required to be disclosed under SUNY policy regarding such felony convictions shall be reviewed by a standing campus committee consistent with the legal standards articulated in New York State Corrections Law.

Students who have previously been convicted of a felony are advised that their prior criminal history may impede their ability to complete the requirements of certain academic programs and/or to meet licensure requirements for certain professions. Students who have concerns about such matters are advised to contact the dean's office of their intended academic program.

I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE, THE ABOVE INFORMATION IS ACCURATE AND COMPLETE.

Signed: _____

Date: _____

-----FOR OFFICIAL USE ONLY-----

Admit **Denied** **By:** _____ **Date:** _____ **Entry Semester:** _____

Entry Type: Continuing Education/F003 Visiting 1 Semester/F005 Visiting 2 Semesters/F006 Visiting Empire State College/F007
Visiting SLN/F011 Post Baccalaureate Study/F950 30-hour Certificate Other/_____