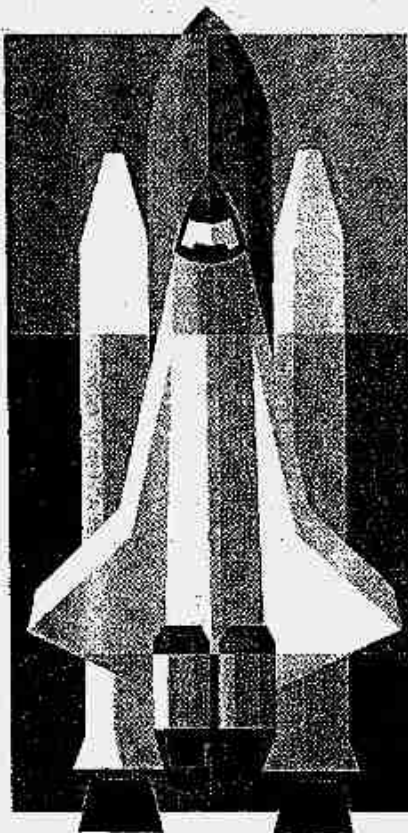


SUMMER, 2004

**COLLEGE NOW
AVIATION ACADEMY**

AT YORK COLLEGE



**INCLUDES A
3 CREDIT
PSYCHOLOGY
COURSE**

SUMMER 2004
COLLEGE NOW AVIATION ACADEMY
at YORK COLLEGE



✈ JULY 6 – AUGUST 12, 2004

✈ FIVE DAYS A WEEK, MONDAY – FRIDAY

AVIATION: Monday – Thursday 9:30 AM – 11:15 AM

PSYCHOLOGY: Monday – Wednesday 11:20 AM – 1:15 PM

SEMAA LAB: Monday - Thursday 1:45 PM – 2:45 PM

FRIDAY – TRIPS TO AIRPORTS & F.A.A. SITES

✈ STUDY THE AVIATION INDUSTRY, JOB MANAGEMENT, SECURITY OPPORTUNITIES, AIRCRAFT FLIGHT

✈ STUDY INTRODUCTION TO PSYCHOLOGY (3 college credits)

✈ RECEIVE ONE HIGH SCHOOL ELECTIVE CREDIT
(based on approval of participating high school)

✈ EXPERIMENT IN A NASA SPACE LAB

✈ LUNCH/SNACK VOUCHER EACH DAY

✈ FREE METRO CARD FOR TRANSPORTATION

THIS PROGRAM HAS LIMITED ENROLLMENT
APPLY EARLY

Contact: COLLEGE NOW LIAISON
Applications Due: June 11, 2004

Instructions for STUDENT completing the form

USE CAPITAL LETTERS FOR ALL ENTRIES !

- Student OSIS** Enter the nine-digit OSIS Number as it appears on your permanent record and program card. No registration will be entered without this number.
- Social Security #** Enter the nine-digit Social Security Number only if you know it. Leave this field blank if you do not know or do not have a Social Security Number.
- Last Name** Enter your last name (surname or family name) - one letter per box.
- First Name** Enter your first name (given name) - one letter per box.
- Street Address** Enter the building number and name of street or avenue where you live. Skip one box between number and street or avenue.
- Apartment #** If appropriate, enter the apartment number.
- City** Enter the city name used by the Postal Service (eg. Bronx, Brooklyn, New York, Staten Island, Flushing, Long Island City, Richmond Hill, etc.).
- Email Address** Enter your email address.
- State** Enter the two letter Postal Service abbreviation (eg. 'NY').
- ZIP** Enter the five-digit ZIP code used by the Postal Service.
- Home Phone** Enter your home telephone number - area code first.
- Date of Birth** Enter your date of birth by using the following format - two digits for the month, two digits for the day, and two digits for the year. (eg. September 30, 1984 would be entered as 09/30/84; April 3, 1984 would be entered as 04/03/83).
- Sex** Enter an 'M' for male or an 'F' for female.
- Race** This item is optional. Check the box you think most appropriate or leave blank.
- Country of Origin** Enter the country where you were born. If United States, enter "US".
- Native Language** Enter the language that you feel most comfortable speaking.
- Entered 9th Grade** Check the year and semester that you entered the 9th Grade. If you entered 9th Grade between February and August check 'Spring'; - if you entered between September and January, check 'Fall'.

Instructions for STAFF completing the form

USE CAPITAL LETTERS FOR ALL ENTRIES !

- HS ETS Code** Enter the last four-digits of the ETS code as used by the DOE for the High School where the student is enrolled. All New York State High School ETS codes begin with '33'. (See list)
- High School** Enter the name of the High School. Spell out as many characters as will fit in the boxes. Use common abbreviations if necessary (eg. HS for High School, TECH for Technical, etc.) (See List)

Instructions for completing "College Now Activity Type"

1. Use most recent College Catalog Course Number and include number of credits (eg. '3.0' or '4.5' or 0.0).
2. Use most recent College Catalog Course Number and include number of credits (eg. '3.0' or '4.5' or 0.0).

A student is in a waiver-funded course when other students in the section are matriculated college students. Tuition is waived for the student and funds are provided to the College Now Program to cover the cost of tuition.

3. Check this box if activity is a High School credit course.
4. Check this box if student is enrolled in another type of course or workshop.
5. Check this box if student is enrolled in another type of course or workshop.

Check more than one box ONLY if the student is enrolled in more than one activity per semester.
You MUST submit a separate form for each semester even if the student was enrolled in the prior semester.

- College Contact** Please print name and phone number of college contact who verified accuracy and completeness of registration form.



College Now

City University of New York
Student Application / Registration Form

To be completed by Student

Student OSIS # (required)

Social Security #

Last Name (required)

First Name (required)

Street Address (required)

Apt. #

City (required)

State

ZIP (required)

Home Phone

Email Address (req)

Date of Birth (mm/dd/yy) (req)

Sex (M or F) (req)

Race (optional)

Black/Non-Hispanic
 White/Non-Hispanic

Asian or Pacific Islander
 Other _____

Hispanic

Country of Origin (required)

Native Language (required)

Year entered 9th Grade (yyyy) (required)

Semester entered 9th Grade (required)

Spring (Feb. - Aug.)
 Fall (Sept. - Jan.)

To be completed by College Now staff

HS ETS Code

High School Name

Check College

- | | | | | |
|---|---------------------------------------|---|--|-------------------------------|
| <input type="checkbox"/> Baruch | <input type="checkbox"/> City | <input type="checkbox"/> John Jay | <input type="checkbox"/> Medgar Evers | <input type="checkbox"/> York |
| <input type="checkbox"/> Borough of Manhattan Comm. | <input type="checkbox"/> C.S.I. | <input type="checkbox"/> Kingsborough Comm. | <input type="checkbox"/> New York City Tech | |
| <input type="checkbox"/> Bronx Comm. | <input type="checkbox"/> Hostos Comm. | <input type="checkbox"/> LeGuardia Comm. | <input type="checkbox"/> Queens | |
| <input type="checkbox"/> Brooklyn | <input type="checkbox"/> Hunter | <input type="checkbox"/> Lehman | <input type="checkbox"/> Queensborough Comm. | |

Check Semester

- | | | | | |
|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|
| <input type="checkbox"/> Spring 2002 | <input type="checkbox"/> Spring 2003 | <input type="checkbox"/> Spring 2004 | <input type="checkbox"/> Spring 2005 | <input type="checkbox"/> Spring 2006 |
| <input type="checkbox"/> Summer 2002 | <input type="checkbox"/> Summer 2003 | <input type="checkbox"/> Summer 2004 | <input type="checkbox"/> Summer 2005 | <input type="checkbox"/> Summer 2006 |
| <input type="checkbox"/> Fall 2002 | <input type="checkbox"/> Fall 2003 | <input type="checkbox"/> Fall 2004 | <input type="checkbox"/> Fall 2005 | <input type="checkbox"/> Fall 2006 |

(check all that apply) College Now Activity Type

If course is a non-credit course, enter 0.0 for 'number of credits'

1 College Course..... Catalog Course Number

Number of Credits

Please check if this course is waiver funded

Use this line if the student is taking a second 'College Now' course this semester

2 College Course..... Catalog Course Number

Please check if this course is waiver funded

3 High School Credit Course

4 Other College Now Course or Workshop (not checked elsewhere)

5 Other College Now Course or Workshop (not checked elsewhere)

College Contact Name

Phone