



YORK COLLEGE
The City University of New York

OFFICE OF ADMISSIONS

NON-DEGREE ADMISSION APPLICATION

APPLICATION INSTRUCTIONS (Read Carefully)

1. This application should be used by an applicant who is applying as a non-degree student and has never attended York College. Returning York College students must file for readmission with the Registrar's Office.
2. Attach a check or money order payable to York College for **\$65.00** for first-time Freshman and **\$70.00** for all other applicants. *The application fee is NOT refundable and records will not be processed without payment.

*THERE IS A \$15.00 CHARGE FOR REDEPOSITING A CHECK RETURNED BY THE BANK.

3. Send or bring the completed application to:
Admissions Office, Room 1B07
York College, The City University of New York College
94-20 Guy R. Brewer Boulevard
Jamaica, New York 11451
 4. Student copies of transcripts of high school (or GED) and all college records must be submitted to the Admissions Office before application can be processed. The only record required for those with a Baccalaureate or higher degree is proof of graduation.
 5. Applicant may have to demonstrate New York State residency in order to receive in-state tuition classification.
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TO QUALIFY AND OBTAIN MATRICULATION AT YORK COLLEGE FOR A SUBSEQUENT SEMESTER YOU MUST:

- A. Take and pass all CUNY skills assessment tests.
 - B. Have an overall average of 2.5 in York College courses, with a minimum of 6 credits completed at York College.
 - C. Have all official college transcripts for each college attended sent to the Registrar's Office.
 - D. Request matriculation from the Registrar's Office.
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ACCEPTANCE AS A NON-DEGREE STUDENT DOES NOT GUARANTEE A SPACE IN A SPECIFIC COURSE.

NOTE: PREREQUISITE COURSE REQUIREMENTS MUST BE MET BEFORE REGISTERING FOR SELECTED COURSES.



OFFICE OF ADMISSION

NON-DEGREE APPLICATION

WINTER SPRING FALL SPRING SUMMER (Please check only one box)

PLEASE READ THE INSTRUCTIONS ON THE FIRST PAGE BEFORE YOU FILL OUT THIS APPLICATION

PLEASE PRINT IN INK

Name of Applicant: _____
Last First Middle/Maiden

Address: _____
No. Street Apt. No. City State Zip Code

Telephone: () _____ Evening Phone: () _____

Male Female Date of Birth _____

Social Security Number: _____

If you do not have a social security number, a unique identifying number will be assigned to your file. This will in no way affect your admission status.

How long have you lived at this address? _____ years and _____ months

If less than one year, give prior address: _____

How long have you lived in New York State? _____ years and _____ months

Citizenship status and alienage are used to determine tuition charges only.

Are you a U.S. citizen? Yes No

If no, please state Country of Birth: _____ Country or Citizenship: _____

If you are not a citizen of the United States of America, which of the following indicates your status as a non-citizen?

Immigrant Number _____ *(Alien registration card must be shown to Admissions staff.)*

Visitor Visa Student Visa Other (Specify)

Have you ever registered for classes at York College? Yes No If so, when? _____

If yes, check status: matriculated non-matriculated permit high school senior program

What major, if any, do you plan to follow at York College _____

LIST BELOW, IN CHRONOLOGICAL SEQUENCE, ALL INSTITUTIONS ATTENDED ABOVE ELEMENTARY SCHOOL LEVEL (HIGH SCHOOL, COLLEGES, ETC.)

Name of Institutions	City, State	Dates of Attendance		Approximate Number of Credits Completed or Degree Awarded
		From: Month Year	To: Month Year	
High School:				
If you received a General Education Diploma, please indicate the date.				
Colleges:				

Have you ever been dismissed from any college? Yes No

If so, state school and date: _____

Are you a veteran? Yes No If yes, when did you serve? From _____ to _____

APPLICANT CERTIFICATIONS

- A. I hereby certify that all the information in this application is accurate and complete. I realize that failure to file the appropriate application may affect my admission status. I understand that all the information contained in this application will be treated confidentially and will be used for institutional purposes only.
- B. I understand that as a non-degree student at York College, I do not qualify for financial aid, (i.e. PELL, TAP, Perkins Loan, Work Study).
- C. I understand that, if I wish to pursue a degree at York College in the future, **I cannot automatically become a matriculated student.** I will have to meet all requirements set forth by the Registrar.
- D. I understand that, as a non-degree student at York College, I am not entitled to an I-20 form for a student visa. The college cannot assume responsibility for my visa status.

Applicant's Signature _____ Date _____

DON'T FORGET TO SUBMIT YOUR APPLICATION FEE

OPTIONAL SECTION

Response to the items that follow (*) is voluntary, and the information will be kept confidential. Refusal to provide this information will not subject the applicant to any adverse treatment.

*Which category describes you best? (Check one.)

- Black, non-Hispanic (2)
- White, non-Hispanic (1)
- Hispanic (4)
- Asian or Pacific Islander (5)
- American Indian or Native Alaskan (6)
- Other, please specify (7)

*From what country or what part of the world did you or your family originally come? (Check the box next to the name of the country or part of the world with which you most identify.)

- | | |
|---|---|
| <input type="checkbox"/> China: Mainland (032) | <input type="checkbox"/> Guyana (065) |
| <input type="checkbox"/> China: Taiwan (148) | <input type="checkbox"/> Haiti (066) |
| <input type="checkbox"/> Hong Kong (170) | <input type="checkbox"/> Jamaica (077) |
| <input type="checkbox"/> Korea (083) | <input type="checkbox"/> Panama (117) |
| <input type="checkbox"/> India (070) | <input type="checkbox"/> Puerto Rico (185) |
| <input type="checkbox"/> Bangladesh (012) | <input type="checkbox"/> England, Scotland or Wales (160) |
| <input type="checkbox"/> Vietnam (178) | <input type="checkbox"/> Germany (056) |
| <input type="checkbox"/> The Philippines (121) | <input type="checkbox"/> Greece (060) |
| <input type="checkbox"/> Israel (075) | <input type="checkbox"/> Ireland (074) |
| <input type="checkbox"/> Peru (120) | <input type="checkbox"/> Trinidad (153) |
| <input type="checkbox"/> Nigeria (113) | <input type="checkbox"/> Italy (076) |
| <input type="checkbox"/> Colombia (033) | <input type="checkbox"/> Poland (122) |
| <input type="checkbox"/> Cuba (038) | <input type="checkbox"/> Russia (158) |
| <input type="checkbox"/> Dominican Republic (045) | <input type="checkbox"/> Other, specify _____ |
| <input type="checkbox"/> Ecuador (046) | |
| <input type="checkbox"/> Barbados (013) | |

*Where were you and each of your parents born? (Check one in each column.)

	YOU	MOTHER	FATHER
Born in the United States excluding Puerto Rico or U.S Territories	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Born in Puerto Rico or U.S. Territories	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Born outside the United States	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Do you speak a language other than English at home? Yes No

If yes, with which language do you feel more comfortable? English
 Language other than English
 Equally comfortable with both