

Niagara County Community College
3111 Saunders Settlement Road
Sanborn NY 14132-9460

REQUEST FOR ON CAMPUS STUDY

ALL completed application/admission materials must be received by the Admissions Office (including interview scheduled) sixty (60) days prior to the start of the semester applied for.

PART A: Applicants who have been dismissed from a college/university for disciplinary reason:

Name of Applicant: _____
Last First Middle Initial

Address: _____
Number and Street, Apt # City State Zip Code

Home Phone: _____ Alternate Phone: _____

Date of Birth: _____ Social Security: _____

College/University Name and address (institution imposing the dismissal):

Name: _____

Address: _____

Offense (s) prompting the dismissal: _____

Detail any information relative to your dismissal that you think NCCC should be aware of:
(Use additional sheets if necessary)

Detail information relative to your conduct (before, during and/or following the event causing dismissal) that you would like NCCC to be aware of: (Use additional sheets if necessary)

College/University official imposing the dismissal:

Name: _____ Title: _____

College/University: _____

Address: _____

Major of Study: _____

I, _____, hereby authorize the release of any and all information that concerns my academic transcripts, disciplinary matters and the confidential information related to Part B of this form to an authorized representative of Niagara County Community College.

Applicant's Signature: _____ Date _____

Part B: Must be completed by all applicants

I hereby request admission to study at Niagara County Community College beginning:

Fall 20 ____

Spring 20 ____

Summer ____

Educational major/program applying to: _____

I verify that I have read the Admission for Persons with Disciplinary Dismissals policy and guarantee that all of the answers I have provided are truthful and complete. I understand what is required of me before I may be accepted. I understand that the College's decision will be based on information provided as a result of this application.

Signature of Applicant: _____ Date: _____

Part C: Must be submitted by all applicants

Recommendation for On Campus Study:

Disciplinary Dismissal Applicants: Part C must be completed by the Vice President of Student Services or similarly ranked official from the relevant institution. A letter of recommendation, on official letterhead must accompany Part C. In addition, the applicant's official records/transcripts from any previously attended college/university must be submitted:

Is the information provided by the applicant on the Niagara County Community College Request for On-Campus Study accurate and complete to the best of your knowledge?

Yes ____

No ____

Would you recommend this applicant for study at Niagara County Community College?

Yes ____

No ____

If YES, Why?

Name of person submitting recommendation: _____

Title: _____ Agency/Institution: _____

Address: _____
Street City State Zip

Phone: _____ Fax: _____ Email: _____

Signature: _____ Date: _____

Please submit to: Niagara County Community College
Office of Admissions
Sanborn, New York 14132
Ph: 716.614.6200 Fax: 716.614.6820
admissions@niagaracc.suny.edu