



Brooklyn College

of the City University of New York

Undergraduate Status Change Application Form



Who Files

Students who have had nondegree status for more than two (2) semesters may apply for degree bearing status on the basis of having achieved one of the following:

1. Scholastic index of 2.5 for the first 7-14 credits or more earned at Brooklyn College in an academic program of liberal arts and core courses.
2. Scholastic index of 2.0 for the first 24 credits or more earned at Brooklyn College in an academic program of liberal arts and core courses.

Application Deadlines

Fall Semester July 1st

Spring Semester January 2nd

Filing Instructions

1. Complete ALL the information requested on the application.
2. Submit official transcripts from ALL institutions previously attended. Have official transcripts sent directly to Brooklyn College, Office of Undergraduate Admissions.
3. Applicants must pass all three (3) CUNY Skills Assessment Tests in reading, writing and math.

Note: Application Processing Fee is NOT required for Status Change Requests.

Office of Undergraduate Admissions

James Hall, Room 1103
 Brooklyn, NY 11210-2889
 (718) 951-5001

Application Information

Applying for: Status Change

Desired Change Date: FALL SPRING SUMMER Year _____

Personal Information

Social Security Number: _____ - _____ - _____

Last Name _____

First Name _____ Middle Name _____

Maiden or Prior Name _____

Address _____

Street Name

City

State

Zip Code

Mailing Address _____

City

State

Zip Code

Length of time at the above address (Months and Years)? _____

Length of time in New York State (Months and Years)? _____

Telephone Number _____

Home

Business

Date of Birth (Month/Day/Year) _____

Sex: Male Female

Citizenship / Residency Information

Are you a United States Citizen? YES NO

Country of Birth _____ Country of Citizenship _____

Immigration Status:

U.S. Permanent Resident with Alien Registration Card _____

Alien Registration Card Number

Date Obtained _____

Month/Date/Year

Other Immigration Status (specify type of visa) _____

Date Obtained _____ Expiration Date _____

Month/Date/Year

Month/Date/Year

Educational History

High School(s) Attended.....

School Name

Address

Date Entered

Date Left

Graduation Date

Universities, Colleges or other Post Secondary Schools Attended.....

School Name

Address

Date Entered

Date Left

Graduation Date/ Degree

School Name

Address

Date Entered

Date Left

Graduation Date/ Degree

I hereby certify that all the information given in this application is accurate and complete. I understand that all the information contained in this application will be treated confidentially and will be used for institutional purposes only. I realize that failure to provide complete and accurate information may affect my admission. I understand that my application will not be considered until all the necessary documents are received by the Office of Undergraduate Admissions.

Signature of Applicant

Date

Do not write below this line

FALL SPRING SUMMER Year _____

Division Code _____

APPROVED

INELIGIBLE

Billing Code _____

Special Conditions: _____

8

Admissions Code _____

Group Code _____

Admissions Signature

Date

Curriculum Code _____

Residence Code _____

Data Entered By: _____

Date

College ETS Code _____

Survey data

The information below is being collected to meet research and federal reporting requirements. Completing this information is solely voluntary. It is confidential and will not be released except in the form of statistical summaries in which individuals are not identified. This information has no adverse effect on either admissions or academic decisions.

Which Category describes you best?

- | | |
|--|--|
| <input type="checkbox"/> Black, non-Hispanic | <input type="checkbox"/> 4 Asian or Pacific Islander |
| <input type="checkbox"/> White, non-Hispanic | <input type="checkbox"/> 5 American Indian or Native Alaskan |
| <input type="checkbox"/> Hispanic | <input type="checkbox"/> 6 Other (please specify) _____ |

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

- | | | |
|--|---|---|
| <input type="checkbox"/> 032 China: Mainland | <input type="checkbox"/> 139 South Africa | <input type="checkbox"/> 153 Trinidad |
| <input type="checkbox"/> 148 China: Taiwan | <input type="checkbox"/> 033 Columbia | <input type="checkbox"/> 160 England, Scotland, Wales |
| <input type="checkbox"/> 170 Hong Kong | <input type="checkbox"/> 038 Cuba | <input type="checkbox"/> 056 Germany |
| <input type="checkbox"/> 083 Korea | <input type="checkbox"/> 045 Dominican Rep. | <input type="checkbox"/> 060 Greece |
| <input type="checkbox"/> 070 India | <input type="checkbox"/> 046 Ecuador | <input type="checkbox"/> 074 Ireland |
| <input type="checkbox"/> 150 Thailand | <input type="checkbox"/> 065 Guyana | <input type="checkbox"/> 076 Italy |
| <input type="checkbox"/> 178 Vietnam | <input type="checkbox"/> 066 Haiti | <input type="checkbox"/> 122 Poland |
| <input type="checkbox"/> 121 Philippines | <input type="checkbox"/> 077 Jamaica | <input type="checkbox"/> 158 Russia |
| <input type="checkbox"/> 075 Israel | <input type="checkbox"/> 117 Panama | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> 113 Nigeria | <input type="checkbox"/> 185 Puerto Rico | |

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 and the U.S. Territories)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Born in Puerto Rico or the 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, which language do you feel more comfortable with?

- English Language other than English Equally comfortable with both

What is your native language? _____ Other Languages Spoken? _____

Father's Name _____ Mother's Name _____

Father's Address _____ Mother's Address _____

Father Living? YES NO Mother Living? YES NO

Father U.S. Citizen? YES NO Mother U.S. Citizen? YES NO