

Undergraduate Internal Second BA/BS Application

Note: This application is ONLY for students who have graduated from Queens College.

Please print: Application for	☐ Summer/Fall	\square Spring	Year		Evening			
☐ Mr. ☐ Mrs. ☐ Ms. Name	(family name)	First		Middle	(Any prior last	name used		
CUNY ID No.		☐ Male	☐ Female	Date of E				
CON 1 ID 100.		iviaic	□ Temale	Date of L	Month	Day	Year	
Student ID No. (If changed, you must bring	g in new Social Security Card)	Email Address						
Day Telephone No. ()		Evening	g Telephone No() Area Code				
AddressNumber and Street		Apt. #	Town or City		State	Z	ip Code	
Length of time at the above address		Mailing add	ess					
	Yrs. Mos.	(If different than		r and Street				
Length of time in New York State	Yrs. Mos.	City			State	Z	ip Code	
Are you a U.S. citizen? ☐ Yes ☐	☐ Yes ☐ No Country of Birth _		Cou	ountry of Citizenship				
If you are not a U.S. citizen, you	u must answer the fo	llowing questio	ns about your imr	nigration stat	us:			
Permanent Resident								
Other (please specify)				pe Di	ate Obtained	Expirat	tion Date	
College Data								
What is your intended major?								
Did you earn a bachelor's degree from (Note: If you checked <i>no</i> , you cannot be a contraction of the contr	-	□ No □ Yes	Date					
Educational/Employment Histo	ory							
Since leaving Queens College, have (Note: If you checked <i>yes</i> and wan					to be sent.)			
You must sign this declaration: I hereby certify that all the informat affect my admission status. I unders purposes only.	ion on this application is							
	Signature			Date	<u> </u>			

Important notice of possible changes:

The City University of New York (CUNY) reserves the right, because of changing conditions, to make modifications of any nature in the academic programs and requirements of CUNY and its constituent colleges without advance notice. Tuition and fees set forth in this publication are similarly subject to change by the CUNY Board of Trustees. CUNY regrets any inconvenience this may cause.

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