

Adult Student Application for Enrollment

Nursing Applicants STOP, Apply Through Adult & Continuing Education

STUDENT INFORMATION

First Name
 Last Name
 Middle Initial
 Today's Date

Home Phone
 Cell Phone
 Email Address
 Male Female

Home Address
 City
 Zip Code

County
 School District of Residence

Emergency Contact & relationship (e.g. parent, sibling)
 Emergency Contact's Phone Number

PROGRAM INFORMATION

Course Applying For
 Session Choice: AM PM Full Day
 Start Date

Center Location: F. Donald Myers Education Center, Saratoga Springs, New York
 Southern Adirondack Education Center, Hudson Falls, New York

Sponsoring Agency (if Applicable): ACCES-VR One Stop Center Veterans Affairs Self-Pay Other

Are you currently employed? Yes No Current Employer

Do you have a High School diploma? Yes No GED TASC Date Received

College(s) Attended
 Credits/Degree(s) Earned

Have you ever been convicted of a crime? If yes, please explain.

A previous criminal conviction will not automatically disqualify you from acceptance, however, a criminal background check may be required for entry into certain programs.

How did you hear about us? Job Fair Friend Poster/Flier TV Ad Newspaper Website Took Previous Course

I hereby certify that the facts set forth in this application are true and complete to the best of my knowledge. I understand that omission and misstatements in this application may be grounds for rejection or dismissal. If electronically sent, this is signed when payment contract is completed.

Signature

Date

Please return Via Email or Fax to expected Site:

F. Donald Myers Education Center, Attn: Guidance
 15 Henning Rd., Saratoga Springs, NY 12866

FAX:(518) 581-3676

Click to Submit Via Email
 to the Myers Center

Southern Adirondack Education Center, Attn: Guidance
 1051 Dix Avenue, Hudson Falls, NY 12839

FAX: (518) 746-3409

Click to Submit Via Email
 to SAEC

Office Use Only
 Received

WSWHEBOCES Meeting Scheduled

Start Date