Admissions Procedures

Please follow the steps below to assist with your admission to DCC:

☐ Submit your admissions application. You may apply using our paper application or online at www.suny dutchess.edu. Once we receive your application, you will receive a letter with a checklist of any items that are missing in order for your application to be complete. This letter will also include your myDCC user name and password.

☐ Submit Transcripts: Request that your high school transcript, GED scores, AP scores, and/or college transcripts be sent to the Dutchess Community College Admissions Office. Official high school transcripts may be mailed or faxed to (845) 431-8605 if accompanied by an official cover sheet from the high school guidance office.

☐ Take Placement Test: If you are a new college student, you will be sent information about taking our placement test. Students who have successfully completed college level English and/or math may have portions of this test waived.

☐ Register for Classes: You will then be accepted and notified by the Office of the Registrar or Office of Academic Services with registration information.

☐ Apply for Financial Aid: Students wishing to be considered for financial aid must complete the Free Application for Federal Student Aid (FAFSA) online at www.fafsa.ed.gov. Upon completion of the FAFSA, New York State residents will be prompted to complete the Tuition Assistance Program (TAP) application for consideration for New York State grants and scholarships.

☐ Request immunization records: Students taking 6 or more credits who were born on or after January 1, 1957 must submit proof of immunity to measles, mumps, and rubella in order to register for classes. Your records may be faxed to 845-431-8504.

☐ Apply for Housing: Students interested in living in our suite-style residence hall should visit www.suny dutchess.edu/dorm to learn more about this opportunity and when to apply online, using your myDCC account.
1. Name: ___________________________________________________________________________
   Last  Please enter name as it appears on your social security card  First  Middle
2. Social Security Number: __ __ __--__ __ __ __ ______________________________________
3. Date of Birth: ___ ___ /___ ___ /___ ___ ___ ___
4. If you are under 21 years of age: Parent(s) Name _______________________________________
   a. Parent’s E-mail: ___________________________________________@_________________________
5. Permanent Address: ____________________________________________________________________________________
   Street
   City  County  State  Zip Code  Country (if not U.S.)
Mailing Address: (If different) ____________________________________________________________________________
   Street
   City  County  State  Zip Code  Country (if not U.S.)
   a. Home Phone: ____________________________  b. E-mail: ________________________@____________
   (The Admissions Office will be corresponding with you via e-mail)
6. Gender:  □ Male  □ Female
7. Are you a U.S. citizen?  □ Yes  □ No
   If no, country of citizenship ____________________________
   If no, do you have a  □ Visa  □ Permanent Resident Card  □ Work Permit  □ Other Documentation
8. Check here if English is not your native language.  □  What is your native language? __________________________
9. a. Are you Hispanic/Latino?  □ Yes  □ No
   b. If Hispanic/Latino, is your background (select one):  □ Central American  □ Dominican
      □ Mexican  □ Puerto Rican  □ South American  □ Other Hispanic/Latino
10. Is your race (select one or more):  □ American Indian or Alaskan Native  □ Asian
    □ Black or African American  □ Native Hawaiian or Other Pacific Islander  □ White
11. Are you applying for full-time or part-time study?  □ Full-time (12+ credits)  □ Part-time (1-11 credits)
    Semester for which you are applying:  □ Fall  □ Spring  Year: ________________
12. If you are a student with a documented disability who is in need of accommodation, please contact the Office for
    Disability Services at (845) 790-3631.
13. For which curriculum are you applying? ____________________________________________
    If unsure, please see the list of programs.
14. Are you applying to the Early Admissions/Bridge program to fulfill your high school senior year requirements?
    □ Yes  □ No
15. Are you applying as a freshman (have not taken college-level work after high school graduation) or as a Transfer
    (have taken college-level work after high school graduation)?  □ Freshman  □ Transfer
16. If you have academic records under another name, please indicate:
   Former Last Name  First Name
17. Complete the information below for all post-secondary institutions (including DCC) which you have (or will have) attended prior to enrollment. Send all transcripts to the DCC Admissions Office. Academic transcripts are required for all colleges you have attended. If you will receive AP credits, please ask the College Board to forward your scores.

<table>
<thead>
<tr>
<th>College Name</th>
<th>City/State</th>
<th>Dates Attended/Degree Awarded</th>
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18. Did you graduate or will you graduate from high school?  
Did you withdraw and/or complete the GED? (check only one)  
[ ] Yes  [ ] No  
[ ] Withdrawal  [ ] GED

19. Enter date (or anticipated date) of graduation, withdrawal or completion of GED: __/__/____

20. High School:

Name: __________________________________________

Address: ________________________________________

City: ____________________________ State: ________ Zip: ____________

21. Military status  
[ ] Active Military Duty  [ ] Dependent of Active Duty  [ ] Veteran  
[ ] National Guard or Active Reserve  [ ] Other __________________

22. Are you applying for the Educational Opportunity Program?  
[ ] Yes  [ ] No

23. a. Have you ever been convicted of a felony? (not including youthful offender status)  
[ ] Yes  [ ] No  

b. Have you been dismissed from a college for disciplinary reasons?  
[ ] Yes  [ ] No

24. Are you interested in receiving information about our new suite-style residence hall on campus?  
[ ] Yes  [ ] No

Signature: ______________________________________ Date: ____________________________

EDUCATION  Current high school students should have their counselor/advisor complete 25 - 29 below:

25. High School CEEB Code: ____________

26. Rank in class is ____________ out of ____________ (class size)

27. High School Average (at time of application): ____________

28. Is this an IEP diploma?  
[ ] Yes  [ ] No

29. Signature of School Official _______________________________________________________________________

If you have any questions concerning any part of this application, or Dutchess Community College's Admissions procedures, please contact the DCC Admissions Office. Hours: Monday through Friday, 8:00 a.m. to 5:00 p.m.

Telephone: (845) 431-8010  Fax: (845) 431-8605  TTY#: (845) 431-1906

The staff of Dutchess Community College is very proud of its campus and facilities, and invites prospective students to visit! Please call the Admissions Office at the number above to make arrangements.

Dutchess Community College does not discriminate on the basis of race, color, gender, religion, age, national origin, disability, or sexual orientation in its educational programs and activities, including employment, or in the admission to such programs and activities. Additionally, it is the policy of Dutchess Community College that all actions within the College towards students and employees will be based on performance-related criteria. Attitudes and preferences of individuals that are personal in nature, such as private expressions of sexual orientation, will provide no basis for judgment related to such individuals.

Please send completed application to:
Dutchess Community College • 53 Pendell Road • Poughkeepsie, NY 12601  
(845) 431-8010  www.sunydutchess.edu