



Office of Registrar
Colston Hall, Room 513
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Bronx Community College
of The City University of New York
2155 University Avenue
Bronx, New York 10453

APPLICATION FOR A SECOND DEGREE

INSTRUCTIONS/REQUIREMENTS:

- Clearly print all requested information below.
- First degree **MUST** be awarded before work on a second degree can begin.
- One degree cannot be obtained twice. *(For example: If I have an AA degree, I cannot apply for or receive a second AA degree, etc.)*

PART I: Contact Information

Student's Name: _____
Last First Middle Initial

Current Address: _____
Street Address

City State Zip Code

CUNYfirst EMPL ID#: _____ National ID#: _____

Email Address: _____ Date of Birth: ____/____/____

Home Phone#: _____ Cell Phone#: _____

PART II: College Information

Name of **OLD** Curriculum pursued: _____

Date Graduated: _____

I wish to apply for Matriculation towards a second Associate Degree.

Name of **NEW** Plan and Subplan you wish to pursue: _____

Semester you wish to begin NEW Plan and Subplan:
 Fall 20 _____ Spring 20 _____ Summer 20 _____

Student's Signature: _____ Date: _____

PART III: (To be completed by the Curriculum Coordinator of the second degree area)

- I hereby give my approval for the above named student to obtain a second degree in the requested course of study. This approval is subject to all college regulations to which it pertains.
- Permission is denied.

Curriculum Coordinator's Signature: _____ Date: _____

FOR OFFICIAL OFFICE USE ONLY – REGISTRAR'S OFFICE

DISPOSITION	DATE
Application Approved	
Application Denied	
Curriculum Code	
Starting Date	
Student Notified	

Processed By: _____ Date: _____
Registrar Representative's Signature