



Office of Registrar  
Colston Hall, Room 513  
P: 718.289.5710  
F: 718.289.6308

Bronx Community College  
of The City University of New York  
2155 University Avenue  
Bronx, New York 10453

# READMISSION APPLICATION

**\$20 Non-Refundable Fee Payable at the Bursar's Office**

Select Requested Semester:  **SPRING**  **SUMMER**  **FALL**

YEAR 

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This form must be submitted in person to the Registrar's Office. Students readmitting to the college are responsible for claiming their CUNYfirst Account. All BCC communication will be sent to your BCC student e-mail address. Starting fall 2013, students may choose to continue their current academic plan or OPT IN to Pathways. Check with your Academic Advisor to discuss your options.

## PART I: Contact Information

**Student's Name:** \_\_\_\_\_  
Last First Middle Initial

**Current Address:** \_\_\_\_\_  
Street Address

City \_\_\_\_\_ State 

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 Apartment# 

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 Zip Code 

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**CUNYfirst EMPL ID#:**

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**National ID#:**

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**Email Address:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Home Phone#:**

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**Cell Phone#:**

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## PART II: College Information

**What was the last term you attended Bronx Community College?** \_\_\_\_\_  
**NOTE:** If you last attended BCC beyond one calendar year, you MUST re-establish your **Residency for Tuition purposes**.  
 Go to <http://www.bcc.cuny.edu/Registrar/?page=ResidencyForTuitionPurposes> or speak with a Registrar representative for more details.

**What was your Plan/Sub-Plan (major)?** \_\_\_\_\_  
 If you are changing your major, complete and attach a Change of Plan form to this application.  
**NOTE:** Students interested in majoring in Nursing, LPN, or Radiology Technology MUST fill out a Change of Plan form at the Registrar's Office. Admission to these majors must be approved by the Academic Department.

**Did you attend another college since leaving Bronx Community College?** .....  Yes  No  
 If yes, which college did you attend? \_\_\_\_\_

**Did you graduate from that college?** .....  Yes  No  
**NOTE:** If the college you attended is a NON-CUNY school, you must submit an official sealed transcript to the Registrar's Office for review, prior to registration or advisement. If the college you attended is a CUNY school, you do not need to submit a transcript.

**The above statements are true and complete to the best of my knowledge.**

**Student's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## PART III: Dismissal

**Dismissal Status** – Students who have been dismissed from the college more than once must submit an **Academic Appeal** to the Student Support Services/General Counseling Office, located in Sage Hall, Room 201, for review prior to submitting the Readmission Application.  
**NOTE:** If your academic appeal is granted by the Committee Academic Standing (CAS), you may submit this application to the Registrar's Office.

## FOR OFFICIAL OFFICE USE ONLY – REGISTRAR'S OFFICE

**Processed By:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
Registrar Representative's Signature