



Office of Registrar  
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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