Application Deadlines
Fall Semester – August 15
Winter Intersession – December 10
Spring Semester – January 10
Summer Session I – May 15; Summer Session II/III – June 15

Important: This application should only be used if you plan on attending John Jay College as a non-degree/visiting student or as a senior auditor. Non-degree/visiting students and senior auditors are accepted on a semester-to-semester basis, depending on space availability, and must apply each semester. Financial aid is not available for non-degree/visiting students or senior auditors. For more information regarding deadlines, policies, and procedures, please visit: www.jjay.cuny.edu/apply-non-john-jay-degree-student

Non-degree students are limited to a total of twelve credits unless they are part of a registered certificate program or the Addiction Studies Program. Senior auditors are limited to two courses per semester.

STEPS TO APPLY:

1. Complete this application in its entirety and sign and date where indicated.
2. Attach a non-refundable check or money order application fee of $65 payable to: JOHN JAY COLLEGE.
3. For first-time college students (or college students with less than 24 college credits), a final high school transcript showing proof of graduation, or GED scores, as well as SAT or ACT scores, are required.
4. For applicants with prior college or university course work, a transcript from every prior institution attended, in addition to proof of high school graduation, is required.
5. The completed application, non-refundable application fee, and transcript(s) should be sent to:

   John Jay College of Criminal Justice
   Office of Admissions, L. 64.00 NB
   524 West 59th Street
   New York, NY 10019

* Applications will not be considered unless all application procedures listed above have been completed.

SENIOR AUDITORS

New York State residents 60 years of age or older may audit undergraduate courses at John Jay College on a tuition-free, space-available basis. There is a two course limit per semester for senior auditors. All senior auditor applicants must submit identification for verification of age and residency. The following forms of identification are acceptable for admission:

Driver’s License  Birth Certificate  U.S. Passport  Medicaid Card

Senior auditors do not receive grades or academic credit for their courses. Individuals enrolling under this program pay fees totaling $80 each semester payable upon registration. Along with verification of age and New York state residency, applicants must submit the Undergraduate Non-Degree/Visiting Student Application. The $65 application fee is NOT required for senior auditors. However, senior citizens who wish to take courses for degree credit must pay the application fee and will be charged the appropriate tuition.
Part I: Personal Information

Please check one: □ Mr. □ Ms. □ Mrs. □ Other: ________________________

First Name: ___________________________ Last Name: ___________________________

Date of Birth: ________ - ________ - ________

Telephone (home): (______) _______ - __________ Telephone (cell): (______) _______ - __________

Email Address: ___________________________

Address: __________________________________________________________

City: ______________________ State: ________ Zip: ________

Social Security #: ________ – ________ – __________ *If you do not have a social security number, a unique identifying number will be assigned to your file and will not affect your admission status.

1. Length of time residing in New York State: ________ years, ________ months


Country of Birth: ___________________________

*If No, please select one of the following:

□ U.S. Permanent Resident:

Alien Registration (I551) Card #: ________ Date Obtained (MM/YY)

□ Temporary Visa:

Type of Visa: ________ Date Obtained (MM/YY) Exp. Date (MM/YY)

3. Have you ever attended a CUNY institution? □ Yes* □ No

*If yes, what is your EMPL ID? ___________________________

4. Have you attended John Jay College of Criminal Justice in the past? □ Yes □ No

*If yes, when did you attend? ___________________________
Part II: Educational Experience, Course Selection, and Certification

List all high schools and all colleges you have attended:

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<thead>
<tr>
<th>Institution</th>
<th>State</th>
<th>From (MM/YY)</th>
<th>To (MM/YY)</th>
<th>Major</th>
<th>Degree Awarded</th>
<th>Date</th>
<th>Credits Completed</th>
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Which semester are you applying for? Fall 20______ Winter 20______ Spring 20_____ Summer 20______

List the course(s) you wish to register for and indicate the four/five digit class number, course, and section from the Schedule of Classes.

1. Class Number: __________ Course:_________________________ Section: __________
2. Class Number: __________ Course:_________________________ Section: __________
3. Class Number: __________ Course:_________________________ Section: __________
4. Class Number: __________ Course:_________________________ Section: __________

PLEASE NOTE: Course registration is dependent on space availability and there is no guarantee that you will be able to enroll in the course(s) of your choosing. Additionally, certain courses require pre-requisites which must be fulfilled prior to registration; otherwise, you will not be permitted to register for your course(s).

Registration for non-degree students is on a first-come, first-served basis and course priority is given to current John Jay College matriculated students. Some course sections are limited to special populations of students which may prohibit you from registering for a particular course. Other courses may also require special permission from the chairperson of the academic department in which that course is sponsored.

All students must comply with New York State Public Health Laws. This law requires that all college students, born on or after January 1, 1957, must provide proof of immunization prior to registering for classes. Please have this Immunization Form completed and sent to the Health Office as soon as possible.

If you have any questions, please contact the Health Office directly at (212) 237-8052, or e-mail: healthoffice@jjay.cuny.edu.

I hereby certify that all of the information contained and submitted with this application is accurate and complete and realize that failure to file the appropriate application by the listed deadline may affect my admission status. I understand that all the information contained in this application will be treated confidentially and will be used for institutional purposes only.

Applicant Signature: ________________________ Date: ________________
Part III: Ethnicity Information

Response to the following questions is voluntary, and the information will be kept confidential. Refusal to provide this information will not subject your application to any adverse treatment.

1. Are you Hispanic/Latino? □ Yes □ No

*Regardless of how you responded to the previous question, please indicate your race by selecting one or more options from the following categories:

□ Black, or African American
□ Asian
□ American Indian or Native Alaskan
□ White
□ Native Hawaiian or Other Pacific Islander

2. What country or part of the world did your family originally come from?

_____________________________________________________________________________________________________

3. Where were you and each of your parents born? (Check one in each column)

<table>
<thead>
<tr>
<th></th>
<th>You</th>
<th>Mother</th>
<th>Father</th>
</tr>
</thead>
<tbody>
<tr>
<td>Born in the United States excluding</td>
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<tr>
<td>Puerto Rico or U.S. Territories</td>
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<tr>
<td>Born in Puerto Rico</td>
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<tr>
<td>Born outside the U.S.</td>
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4. Do you speak a language other than English at home? □ Yes* □ No

*If yes, with which language do you feel more comfortable?

□ English □ Language other than English □ Equally comfortable with both

Please list all other languages you speak at home:

_____________________________________________________________________________________________________

5. Parent Information

Father’s First Name: ____________________ Last Name: ____________________
Father living? □ Yes □ No U.S. Citizen? □ Yes □ No Born in U.S.? □ Yes □ No
Father’s Residence: ____________________________________________________

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<th>City</th>
<th>State</th>
<th>Zip Code</th>
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| Mother’s First Name: ____________________ Last Name: ____________________
Mother living? □ Yes □ No U.S. Citizen? □ Yes □ No Born in U.S.? □ Yes □ No
Mother’s Residence: ____________________________________________________

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