SUNY Cortland Enrollment Form

Dual Diploma Program – Türkiye

Name:	(Last or Family Name)	(First or Gi	ven Name)	(Middle Name)
Please	check the program in which y	ou are enrolled:		
	Anadolu University	: Business Econ	omics	
	Anadolu University	: Teaching Engl	ish as a Second	Language (TESL)
	Pamukkale Univers	ity: Economics		
	Pamukkale Univers	ity: Public Admi	inistration and F	Public Policy
Entrand	ce Date in Türkiye to the Dua	Türkiye to the Dual Diploma Program:(mm/yyyy)		
Did yo	ou enter as a new student or as	a transfer:	New	Transfer
Name ((exactly) as it will appear on y	our passport:		
CONT	ACT INFORMATION			
Permar	nent Home Mailing Address:			
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Home l	Phone Number:			
Curren	t University Address (If differ	ent from permar	nent address):	
Curren	t Phone Number (If available)	:		
Email:				
Cell Ph	one Number:			

PERSONAL INFORMATION Date of Birth (mm/dd/yyyy): Male/Female: M F Country of Birth: Country of Citizenship: **EDUCATION INFORMATION** Secondary School Attended: Name: Location: Enrollment Dates (mm/yy-mm/yy): Diploma & Date Received (mm/yyyy): Have you attended any other post-secondary institution prior to enrolling in this program? Yes No If yes, please complete: Name: Location: Enrollment Dates (mm/yy-mm/yy): Certificate, Diploma or Degree Received: Date Received (mm/yyyy): ACADEMIC ENTRANCE INFORMATION Student Selection and Placement Exam Score: _____ Year Score was received (yyyy): _____ Secondary School Grade Point Average: English proficiency test name: Date test was taken (mm/yyyy):

Test score:

How many years of English have you studied?

Did you enroll in the Dual Diploma Prog		on Program prior to enrolling in the				
Ye	S	No				
If yes, how many years did you attend?						
ADDITIONAL INFORMATION						
Do you require who disabilities?	eelchair-accessible h	nousing or other accommodations for students with				
Yes	3	No				
If yes, plea	se describe:					
EMERGENCY CONTACT INFORMATION						
Person to be notified in case of emergency:						
Name: _						
Address:						
_						
_						
Phone:						
Relationshi	ip to you:					
Signature:						
Date (mm/dd/yyyy):						