



SUPPLEMENTAL INFORMATION FORM

Applicants that have graduated from high school prior to applying to SUNY Delhi are **required** to complete and submit this form. Using the fields below, please indicate **all** activities that you have been involved in since your high school graduation. Be sure to provide as much detail as possible along with the dates of each activity.

First Name: _____ **Last Name:** _____ **Former Name:** _____
Date of Birth: _____ **Cell Phone Number:** ~~XXXXXXXXXXXXXXXXXXXX~~ **Email Address:** _____

<u>Delhi Program of Interest</u>	<u>Location*</u>
SUNY Delhi Program: _____	Main Campus, Delhi, NY
BBA in Hospitality Mgmt./Hotel and Resort	OCC SCCC TC3 Online
BBA in Hospitality Mgmt./Event Management	SCCC
BBA in Business and Technology Mgmt.	OCC SCCC TC3
BS in Criminal Justice	SCCC Online
RN to BSN	Online

OCC = Onondaga CC; **SCCC** = Schenectady Cty CC; **TC3** = Tompkins Cortland CC

What **semester/year** do you wish to begin taking SUNY Delhi courses? **Fall 20**____ **Spring 20**____
 Do you anticipate being a part-time or full-time student with SUNY Delhi? **Full-Time** **Part-Time**
 Will you be applying for financial aid through SUNY Delhi? **YES** **NO**

Colleges Attended

Did you attend a college / university, trade school, or BOCES after high school? **YES** **NO**
 If yes, list all below. ***All transcripts must be sent to the Admissions Office***

Name of Institution: _____	Major: _____	Dates of Attendance: _____
_____	_____	_____
_____	_____	_____

Employment History *Please attach resume(s) if more space is needed.*

Name of Employer: _____	Title: _____	Dates of Employment: _____
_____	_____	_____
Military Service: _____	To: _____	From: _____

Other - Please Explain: _____

Have you ever been expelled and/or dismissed from a college for disciplinary reasons? **YES** **NO**
 If yes, list date: _____

 I understand that this form cannot be processed if it has not been completed according to instructions and that any deliberate falsification or omission of data may result in a denial of admission, revocation of acceptance decision, or administrative dismissal from the College. All information submitted is true to the best of my knowledge.

Signature: _____ Date: _____