

Filing Dates
August 15 for Fall
January 15 for Spring



**Attach \$125 Non-Refundable
Application Fee Here**
(check or money order)

**Office of Graduate Admissions • Jefferson Hall, Room 105
Queens College, CUNY • Flushing, New York 11367-1597 • 718-997-5200**

EECE Post-Master's Certificate Application

Filing Instructions and General Information

1. Admission is limited to those applicants who have a master's degree and U.S. teaching certification. Proof of your degree and certification must be submitted with your application (photocopy of diploma or student copy of final transcript).
2. Students are responsible for contacting the graduate program advisor/representative. **This application must be signed by the departmental advisor/representative before it can be processed. ***
3. Queens College requires that all students comply with New York State Public Health Laws #2165 and 2167: All college students born on or after Jan. 1, 1957 must present proof of immunity against Measles, Mumps, and Rubella, and certify that they have received information about meningitis vaccine. An immunization form covering both requirements is available through the college's Web site at www.qc.cuny.edu/Health_Services/ and must be filled out by your physician and then returned to the Queens College Health Service Center, Frese Hall, 3rd floor, 65-30 Kissena Blvd., Flushing, NY 11367-1597. For more information regarding immunization compliance, please call 718-997-2760.

Please print.

Application for Fall Spring Year _____

Name of Applicant _____
Last (family name) First Middle (Any prior last name used)

Soc. Sec./ID No. _____ Male Female Date of Birth _____
Month Day Year

Address _____
Number and Street Apt. # Town or City State Zip code

Telephone No. (Day) (____) (____) (Evening) (____) (____)
Area code Area code

Email address _____

Length of time at the above address _____ Length of time in New York State _____
Yrs. Mos. Yrs. Mos.

Country of Birth _____ Are you a U.S. citizen? Yes No If not, please indicate status:

Immigration Status: Permanent Resident _____ (Attach a photocopy of your "Green Card.")
Alien Registration # Date of entry on card

Visa _____
Specify type Date obtained Expiration date

Have you ever taken graduate courses at Queens College? Yes No

Indicate program/specialties: _____

***Approved:** _____
Signature of Graduate Advisor/Representative Print name Date

Academic Record: Please indicate names of institutions and dates degrees were conferred.

Bachelor's degree from _____

Master's degree from _____

PhD or other degree (specify) from _____

(Please See Reverse Side)

..... **FOR OFFICE USE ONLY – DO NOT WRITE IN THIS SPACE**

Division Billing Adm. Code Group FINTP RESDE "ON LINE"

Optional Ethnic Data Section

Response is voluntary; all information will be kept confidential. Refusal to provide this information will not subject the applicant to any adverse treatment.

Which category describes you best? (1) White, non-Hispanic; (2) Black, non-Hispanic; (4) Hispanic; (5) Asian or Pacific Islander;
 (6) American Indian or Native Alaskan; (7) Other (specify) _____

From what country or part of the world did you or your family originally come? Check the box next to the country with which you most identify:
 (032) China–Mainland; (148) China–Taiwan; (170) Hong Kong; (083) Korea; (070) India; (150) Thailand; (178) Vietnam;
 (121) The Philippines; (075) Israel; (113) Nigeria; (139) South Africa; (033) Colombia; (038) Cuba; (045) Dominican Republic;
 (046) Ecuador; (065) Guyana; (066) Haiti; (077) Jamaica; (117) Panama; (185) Puerto Rico; (153) Trinidad;
 (160) England/Scotland/Wales; (056) Germany; (060) Greece; (074) Ireland; (076) Italy; (122) Poland; (158) Russia;
 Other (specify) _____

Where were you and each of your parents born? Check one in each column:

	You	Mother	Father
Born in the United States, excluding Puerto Rico or U.S. Territories	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Born in Puerto Rico or U.S. Territories	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Born outside the United States	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Are you a United States citizen? Yes No If you are *not* a United States citizen, what is your:
Country of birth: _____ Country of citizenship: _____

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

Elementary & Early Childhood Education 15-Credit Post-Master's Certificates of Advanced Study

Program Applied for	Program Code	Certificate Program
<input type="checkbox"/>	G1	Early Childhood Education (Birth to Second Grade)
<input type="checkbox"/>	G2	Language Minority Education
<input type="checkbox"/>	G3	Child Development Psychology
<input type="checkbox"/>	G4	Science Education
<input type="checkbox"/>	G5	Social Studies Education
<input type="checkbox"/>	G6	Math Education
<input type="checkbox"/>	G7	Children's Literature

Currently, the program advisor for the EECE Post-Master's Certificates of Advanced Study is Assistant Professor Lee Bisland.
Office: Powdermaker Hall, Room 135
Phone: 718-997-5464
Email: Beverly.Bisland@qc.cuny.edu

Other helpful telephone numbers: Bursar, 997-4500 • Financial Aid, 997-5100 • Registrar, 997-4400

Certification: The statements made in this application are true and complete to the best of my knowledge and belief.

Signature _____ Date _____

The City University of New York reserves the right, because of changing conditions, to make modifications of any nature in the academic programs and requirements of the University and its constituent colleges without advance notice. Tuition/fees are similarly subject to change by the CUNY Board of Trustees. The University regrets any inconvenience this may cause.

Queens College of the City University of New York does not discriminate on the basis of age, sex, race, color, creed, national origin, physical or mental disability, sexual orientation, marital status, alienage or citizenship status, or veteran's status. The college will comply with Title IX of the Educational Amendments Act of 1972, which protects persons from discrimination on the basis of sex in the operation of its educational programs or activities. Inquiries should be directed to the Affirmative Action Coordinator, Kiely Hall, Queens College, Flushing, NY 11367-1597.