TEACHERS ON SABBATICAL PROGRAM
Application for Graduate Non-Matriculated Study (Instructions)

Steps to Enrollment:

1. Please read the section below on “Admission and Academic Policies” and complete the attached application.

2. Submit your application and fee to the Office of Recruitment and Admissions (address, location, and contact information indicated at the top of this form) for processing. The application fee will be held until you confirm that your sabbatical application has been approved by the Department of Education and your school.

3. The Office of Recruitment and Admissions will coordinate your registration when your file is completed and your sabbatical has been approved. You will be sent instructions via email explaining how to access your schedule, view your bill and pay your tuition.

Admission and Academic Policies:

1. A non-refundable $125.00 application fee (check or money order), made payable to the College of Staten Island, must accompany this form when submitted to the Office of Recruitment and Admissions.

2. To be admitted as a graduate non-matriculated student, an applicant must hold a baccalaureate or master’s degree (or its equivalent) from a regionally accredited college or university. The applicant must submit evidence of receipt of this degree (student or official copy of final transcript).

3. A copy of the sabbatical approval letter should also be submitted when available.

4. Acceptance as a non-matriculated student in no way commits the College to grant matriculation at a later date.

5. Financial aid is not available for non-matriculated students.

6. All students born on or after January 1, 1957, who are enrolling for six or more equated credits must have proof of immunization on file at the College Health Center (Bldg. 1C, Rm. 112). You can contact the Health Center at (718) 982-3045 (phone) or http://www.csi.cuny.edu/studentaffairs/healthservices/.
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Please read the attached instructions before completing this form

Semester(s) you wish to enroll, please select one:

( ) Full Year Program – Fall & Spring semesters, 16 credits

( ) Spring Semester Only (half-year sabbatical), 8 credits: EDD 690 and CSC 704. Please note, EDD 691 and ENG 630 will only be available for full-year sabbatical applicants participating in the Fall and Spring semesters.

SS#: __________ - ________ - _______________ Male ( ) Female ( ) Date of Birth: ___/___/____

________________________________________________________
Last Name First Name Middle

________________________________________________________
Former Last Name (if applicable) Former First Name (if applicable)

________________________________________________________
Street Apt. # City

________________________________________________________
State Zip Code Telephone Work/Alternate Telephone

E-mail address: __________________________________________

Length of time (years and months) at the above address? ________________ in NYS? ___________________

Are you a United States Citizen? ( ) Yes ( ) No, I have a: ____________________________
Immigration Status or Visa Type Alien Registration #

Have you ever enrolled in courses at the College of Staten Island (CSI)? ( ) YES ( ) NO

Have you ever enrolled in courses at the City University of New York (CUNY) other than CSI? ( ) YES ( ) NO

Revised 6/10/2015
POST-SECONDARY EDUCATION:

_________________________________________________________________________________________________________

Name of the institution                                                                                   Dates of Attendance                                                                                   Degree earned/major

_________________________________________________________________________________________________________

Name of the institution                                                                                   Dates of Attendance                                                                                   Degree earned/major

EMPLOYMENT INFORMATION:

School: ____________________________________________________________________________________________ District: __________________

Subject you teach (if applicable): ________________ License/Certification Area: __________________________

ETHNICITY SURVEY
Response to the following two questions is voluntary; refusal to provide this information will not affect consideration of your application. This information will be kept strictly confidential and used for statistical purposes only.

1) Are you Hispanic / Latino?    ( ) Yes    ( ) No

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

( ) American Indian or Alaska Native

( ) Asian

( ) Black or African American

( ) Native Hawaiian or Other Pacific Islander

( ) White

APPLICANT’S CERTIFICATION:

I submit herewith my application for graduate non-matriculated study at the College of Staten Island and hereby certify that the information given in this application is accurate and complete. I understand that misinformation or information withheld may result in the cancellation of my application. I have read the instructions and policies on the reverse side.

Signature of Applicant: ____________________________________________