Office of Admissions

SUNY Polytechnic Institute 100 Seymour Rd., Utica, NY 13502 1 (866) 278-6948 • (315) 792-7500 • fax (315) 792-7837

SUPPLEMENTAL APPLICATION

Thank you for your application for transfer admission. SUNY Polytechnic Institute values individuals from diverse backgrounds; along with your previous academic record, we will review additional academic and personal information submitted with your supplemental application to determine your admissions and scholarship eligibility. Please return this form within **15 days directly** to SUNY Polytechnic Institute Office of Admissions in order to complete your application (please feel free to use a separate page if you would like to expand on a particular area).

I am applying for 🗅 Spring 🗅 F	fall SUNY Poly Major		
Personal InformationMrMs			
Last	First	M.I.	D.O.B.
Please provide your e-mail addre	ess, if available		
Colleges Attended List every college you have atter	nded		
College		Attendance Dates	Credits Completed GPA
Please describe your work expension Description	rience including type of work, Employer	dates and hours per wee	Dates Hrs./week
Activities & Achievements			
List your participation in and/or a community involvement/voluntee			r academic, sports, work or

Mandatory Essay

Please submit on separate paper, a personal statement that will provide us with information that might be pertinent to your application. Include reasons for breaks in employment/college, explanations for poor grades, extenuating circumstances, etc. In cases where academic performance was below expectation, please explain what obstacles prevented you from being successful and how you have dealt with these obstacles to insure your academic success at SUNY Polytechnic Institute.