

Uploaded

JEFFERSON COMMUNITY COLLEGE REQUEST FOR A STUDENT AGREEMENT

SS#		JCC # J				
Check Military Affiliation:		Active Duty	Family MemberVeteran			
Please print clearly						
Last Name:		First Name:			Middle Init	ial:
Active Duty Complete: Occupational Specialty			Pay C	Grade:	Years in ser	rvice
Branch of Service	(Please Check	one) ArmyMarin	ne Navy	_ Coast G	uard Air I	Force
I understand that it Jefferson Commun		ibility to submit this re	equest to reduce th	e residen	cy credits requir	red by
Student Signature			Date			
Telephone:						
	e you are pursi	uing at JCC (CHECK degree program			— ponsibility to c	omplete a
Accounting, AAS			Individual Studies, AA			
Business Administration, AS			Individual Studies, AS			
Business Administration, AAS			Individual Studies, AAS			
Hospitality & Tourism, AASComputer Information Systems, AS			Liberal Arts, AA (Humanities/Social Sciences) Liberal Arts, AS (Math and Sciences)			
Computer Science, AS			Office Technology, AAS (Administrative Assistant)			
Criminal Justice, AS			Office Technology, AAS (Medical Office)			
Paralegal, AAS			Other			
Return the comple	ted Student Agı	reement request form t	o: Betsi Bentz, Dir	ector of (Community Serv	vices Ft. Drum
Jefferson Community College 1220 Coffeen Street, Watertown, NY 13601						
OFFICE USE ONLY		bbentz	@sunyjefferson.ed	u		
Submitted	Rev. 01/03/2022	2				
Approved						