



EOP Transfer Applicant Information Sheet

Please complete all sections of this form. The information you provide will allow us to verify your previous Opportunity Program status and to make a final decision on your admission to EOP at JCC. This form **must be returned** in order for us to review your eligibility and finalize your EOP admission.

Name: _____ Social Security #: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Email: _____

Returning Student: _____ Transfer Student: _____

Please check Yes or No:

- Yes No I am currently a New York State resident
- Yes No I have earned an associates' or bachelors' degree
- Yes No I am in default on a federal student loan
- Yes No I was previously admitted to a college under EOP, HEOP, SEEK/College Discovery or a similar Opportunity Program

List all colleges attended and terms attended.

College: _____ Terms: _____ (H)EOP? (Y/N)_____

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All EOP transfer applicants must return this form to:

Educational Opportunity Program
Admissions Office
Jefferson Community College
1220 Coffeen Street
Watertown, NY 13601
(315) 786-2277