COLLEGE of STATEN ISLAND/CUNY
UNDERGRADUATE ADOLESCENCE EDUCATION PROGRAMS

APPLICATION to PROGRAM
For admittance to the Fall 2014 Semester

Dear Undergraduate Adolescent Education Program Applicant,

Please print out, complete, and submit this application to the attention of Prof. Rogers, the Undergraduate Adolescence Education Program Coordinator, in room 3S-208, by March 14, 2014.

As you complete your application, please attend to the following reminders:

- Complete all information on the application form in legible penmanship.
- Include transcripts from all colleges attended. CSI transcripts may be unofficial copies.
- Make sure that your nomination forms have been sent to the education department. Nomination must be from faculty members (inside or outside of the Education Department) whose course you have completed by the time you submit this application.
- Write quality essays! Proof read them to make certain that you answer each question fully and separately. Your ideas should address the topic and answer all parts of the question. Your essays should be organized, clearly articulated, and without any errors. We read each essay carefully! Your writing is being evaluated to determine your potential to be a teacher and role model.
COLLEGE of STATEN ISLAND/CUNY
UNDERGRADUATE ADOLESCENCE EDUCATION- PROGRAM

APPLICATION to PROGRAM

1) CONTACT INFORMATION:

Name________________________________________________________

Soc.Sec.# _____________________________Phone # ___________________

Address ______________________________________________________

City/State_______________________________Zip Code ______________

E-mail _______________________________________________________

2) PREVIOUS EDUCATION:

List all post-secondary institutions you have attended, beginning with the name of current or last attended. A transcript must be supplied for every college you attended including CSI. For CSI, the transcript can be an unofficial copy.

<table>
<thead>
<tr>
<th>Name of Institution</th>
<th>State</th>
<th>Date of Attendance From</th>
<th>Date of Attendance To</th>
<th>Approximate number of credits completed</th>
<th>GPA</th>
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<td>Mo./Yr.</td>
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3) **Ethnicity Survey (Optional):**

The information below is being collected to meet research and federal reporting requirements. It is confidential and will not be released except in the form of statistical summaries in which individuals are not identified. Response is voluntary. This information has no bearing on either admissions or academic decisions.

A) Which category describes you best?

___American Indian or Native Alaskan (06) ___Puerto Rican (03)  
___Asian or Pacific Islander (05) ___White, Non-Hispanic (01)  
___Black, Non-Hispanic (02) ___Other (07)  
___Hispanic (04) ___Choose not to answer (09)

B) From what country or part of the world did you or your family originally come? Check the box next to the country or part of the world with which you most identify.

___Bangladesh (012) ___Germany (056) ___Italy (076) ___Russia (158)  
___Barbados (013) ___Greece (060) ___Jamaica (077) ___South Africa (139)  
___China: Mainland (032) ___Guyana (065) ___Korea (083) ___Thailand (150)  
___China: Taiwan (148) ___Haiti (066) ___Nigeria (113) ___Trinidad (153)  
___Columbia (033) ___Hong Kong (170) ___Panama (117) ___Ukraine (223)  
___Cuba (038) ___India (070) ___Peru (120) ___Vietnam (178)  
___Dominican Rep. (045) ___Ireland (074) ___Philippines (121)  
___Ecuador (046) ___Israel (075) ___Poland (122)  
___England, Scotland, or Wales (160) ___Puerto Rico (185)  
___Other, specify ........................................  
___Choose not to answer (09)
C) Where were you and each of your parents born?

Check one in each column:

<table>
<thead>
<tr>
<th></th>
<th>You</th>
<th>Mother</th>
<th>Father</th>
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</thead>
<tbody>
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<td>Born in the U.S. excluding Puerto Rico or U.S. Territories</td>
<td>___</td>
<td>___</td>
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<tr>
<td>Born in Puerto Rico or U.S. Territories</td>
<td>___</td>
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<tr>
<td>Born outside the U.S.</td>
<td>___</td>
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</table>

D) 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

4) References: please ask two faculty members, one of whom is not from the Education Department, to nominate you for admission into the undergraduate adolescence education program. Please distribute the attached Nomination Forms to two faculty members and provide the name and phone number of the two faculty members below.

1.________________________________  2.________________________________

6) On separate pages, please turn in a typed essay in response to the following question:

How you have come to the decision to teach adolescents in your subject are of choice (that is, your major)? In your response address and provide examples of:

   a) those aspects of your college major (i.e., biology, chemistry, English, history, Italian, Spanish, or mathematics) that you believe are most important in your teaching of adolescents;
   b) your prior experience working with adolescents;
   c) the characteristics you think you possess that would make you an effective teacher.
COLLEGE OF STATEN ISLAND/CUNY
UNDERGRADUATE ADOLESCENCE EDUCATION PROGRAM
NOMINATION FORM

To be completed by applicant:
I am requesting that ______________________________ (print name of person nominating the student) complete the nomination form as part of my application for admission to the College of Staten Island Undergraduate Adolescence Education program. With respect to any rights that I may have regarding access to the nomination form at a later date, (check one):

___ I waive my rights to have access to this nomination form.
___ I do not waive my rights to have access to this nomination form.

____________________  ____________
Printed name of applicant   Signature of applicant

_________ __________
Date

To the nominating faculty member: If you are willing to nominate this student for admission into the Undergraduate Adolescence Education program, please sign and return this form to Prof. Bethany Rogers, Program Coordinator, Education Department, 3S-208, no later than October 15, 2013.

****

I hereby nominate the student named above for admission into the Undergraduate Adolescence Education program. In my estimation, this candidate’s academic achievement warrants his/her admission into the program.

____________________
Faculty Member’s Name

____________________
Signature

____________________
Name of course taken by student

____________________
Semester during which the course was completed

____________________
Telephone of faculty member

____________________
Date

Comments (optional):
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___ I waive my rights to have access to this nomination form.

___ I do not waive my rights to have access to this nomination form.

__________________  _____________________        ___________________________________
Printed name of applicant  Signature of applicant

_________________________________
Date

To the nominating faculty member: If you are willing to nominate this student for admission into the Undergraduate Adolescence Education program, please sign and return this form to Prof. Bethany Rogers, Program Coordinator, Education Department, 35-208, no later than October 15, 2013.

I hereby nominate the student named above for admission into the Undergraduate Adolescence Education program. In my estimation, this candidate’s academic achievement warrants his/her admission into the program.

_________________________________  _______________________
Faculty Member’s Name  Signature

_________________________________
Name of course taken by student  Semester during which the course was completed

_________________________________
Telephone of faculty member  Date

Comments (optional):