



Westchester Community College

State University of New York

To: Admissions Office **From:**

Fax: (914)606-6540 **Pages:**

Phone: (914)606-6735 **Date:**

Re: Application for Admission **Your phone:**

Your email:

Applications will not be processed until all required forms received

- Application form
 Immunization forms
 Certificate of Residence
 High School Transcript
 College Transcript

Class Choices:

	Course Name	Four Digit Reference #
First Choice(s)		
Alternatives (if first choice is closed)		

[Pick the date]

