

# APPLICATION FOR ADMISSION

FALL 20\_\_\_\_  SPRING 20\_\_\_\_

MATRICULATED (DEGREE PROGRAM)  
 NON-MATRICULATED (Non degree)

DAY SCHOOL  
 EVENING SCHOOL

FULL TIME (12 Credits or more)  
 PART TIME (less than 12 credits)

SPECIAL STUDENT

Please print or type and, answer all questions-

Name \_\_\_\_\_ S.S. No. \_\_\_\_-\_\_\_\_-\_\_\_\_ Date of birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone (\_\_\_\_)\_\_\_\_-\_\_\_\_ Cell (\_\_\_\_)\_\_\_\_-\_\_\_\_ E-mail \_\_\_\_\_

Marital status  Married  Single  Separated  Divorced

Place of birth \_\_\_\_\_ Citizen of U.S.? \_\_\_\_\_ If not indicate country \_\_\_\_\_

Type of visa \_\_\_\_\_ Are you a permanent resident of the U.S.?  Yes  No

If not a permanent resident are you applying for a foreign student visa (1-20)  Yes  No

Permanent home address (if different from above) \_\_\_\_\_

## EDUCATIONAL BACKGROUND

Type of school now attending:  Public H.S.  Junior College  Senior College  None

List all High Schools attended

Name \_\_\_\_\_ Location \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Name \_\_\_\_\_ Location \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Date of Graduation \_\_\_\_/\_\_\_\_/\_\_\_\_ If not, do you have a High School Equivalency Diploma?  Yes Date issued \_\_\_\_/\_\_\_\_/\_\_\_\_  No

List all schools attended after high school:

Name \_\_\_\_\_ Location \_\_\_\_\_ from \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_\_

Name \_\_\_\_\_ Location \_\_\_\_\_ from \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_\_

Did you graduate? \_\_\_\_\_ If yes, list type of degree \_\_\_\_\_

Have you received any federal or state financial aid?  Yes  No if yes, are you in default of a student loan  Yes  No

Are you applying for:  Transfer credit?  Financial Aid?  Associate Degree Program

Anticipated major if applying for a degree program  Architectural Technology/Interior Design  Building Construction Technology  
 Architectural Technology/Building Design

**WORK EXPERIENCE** (list last job first) Employer Address Position from to

1. \_\_\_\_\_

2. \_\_\_\_\_

## PERSONAL BACKGROUND

Father's name \_\_\_\_\_ Occupation \_\_\_\_\_

Mother's name \_\_\_\_\_ Occupation \_\_\_\_\_

Do you live with your parents  Yes  No

Parent address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Indicate methods of financing education

Personal funds  Scholarships  Veterans benefits  Part time employment  Pell grant  Family assistance

Student loans  N.Y. State T.A.P. Award (NY residents only)

## RACIAL ETHNIC DATA (Optional)

Black Non Hispanic  American/Alaskan Native  Asian Pacific Islander  Hispanic  White Non Hispanic

## HOW DID YOU HEAR ABOUT I.D.C.

Daily News  Yellow Pages  Chief  Representative  Recommended/Friend  Internet  College Night

H.S. Visit  Employer  Other/Specify \_\_\_\_\_

## REFERENCES

1. \_\_\_\_\_

2. \_\_\_\_\_

*If admitted to the Institute, I agree to abide by the regulations of the Institute and concede to the Institute the right to require my withdrawal at any time and for any reason deemed sufficient. Failure to furnish all information on past education will constitute grounds for disqualification of the applicant and/or subsequent dismissal.*

Date \_\_\_\_\_ Signature of applicant \_\_\_\_\_

Office Use Only

Amount Paid

\_\_\_\_\_

Received

\_\_\_\_/\_\_\_\_/\_\_\_\_

## APPLICATION CHECK LIST

- I have requested my high school to send I.D.C. a transcript.
- I have requested my previous college to send I.D.C. a transcript.
- Enclosed is a copy of my GED; I will bring in the original when I register for classes.
- Enclosed is the \$30 application fee.(Non refundable)

**SEND TO: Kevin Giannetti, Office of Admission  
Institute of Design and Construction  
141 Willoughby Street  
Brooklyn, NY 11201-5380**