EASTERN CAMPUS - RIVERHEAD
DRIVER AND TRAFFIC SAFETY EDUCATION COURSE
APPLICATION FORM – SUMMER 2013

PLEASE PRINT CLEARLY

F ☐ M ☐
FULL NAME ___________________________ STUDENT I. D. # ________ (office use only)

HOME ADDRESS ___________________________ DATE OF BIRTH __________

TOWN ___________________ STATE NY ZIP _______ HOME PHONE # __________

HIGH SCHOOL _____________________________

YOU MUST SELECT ONE CLASSROOM SECTION AND ONE DRIVING SECTION.
**Due to limited availability, the college reserves the right to make changes to any student’s schedule within the selected time block.

CLASS MEETINGS
Monday, Friday and Saturday.

CRN: 62902 ☐ 8:30 a.m. - 10:00 a.m. CRN: 62903 ☐ 10:00 a.m. - 11:30 a.m.
CRN: 62904 ☐ 11:30 a.m. - 1:00 p.m. CRN: 62905 ☐ 1:00 p.m. - 2:30 p.m.

IN-CAR LABORATORY INSTRUCTION
Monday, Friday and Saturday

CRN: 62906 ☐ 7:00 a.m. - 8:30 a.m. CRN: 62907 ☐ 8:30 a.m. - 10:00 a.m.
CRN: 62908 ☐ 10:00 a.m. - 11:30 a.m. CRN: 62909 ☐ 11:30 a.m. - 1:00 p.m.
CRN: 62910 ☐ 1:00 p.m. - 2:30 p.m.

REFUND POLICY: Since all courses are on a first-come, first-served basis, we encourage you to apply early. If a course should be canceled due to insufficient enrollment, you will be notified and you will have a check issued as promptly as possible. Refunds will follow the same percentage formula as that for credit courses. Specific dates will be determined based upon individual course schedules. Any questions should be referred to a campus business office.

Have you ever been convicted of a felony? Yes ___ No ___
Have you ever been suspended, dismissed or expelled from college for disciplinary reasons? Yes ___ No ___

PARENT/GUARDIAN PERMISSION: I hereby give my son/daughter permission to register in the non-credit State-certified Driver and Traffic Safety Education Course to be offered at Suffolk County Community College beginning by June 24, 2013.

_________________________________________ ________________________
Parent/Guardian Signature Date

REMINDER: THIS APPLICATION MUST BE ACCOMPANIED BY YOUR CHECK MADE PAYABLE TO SUFFOLK COUNTY COMMUNITY COLLEGE IN THE AMOUNT OF $538.50 and mailed to SCCC Registrar’s Office, 121 Speonk-Riverhead Road Riverhead, NY 11901. If you register in person, this application must be accompanied with a check, Master Card or Visa payment.

DEADLINE FOR RECEIPT OF APPLICATION IN PERSON OR BY MAIL IS June 7, 2013.

**Please note: NO changes to your schedule will be permitted after June 14, 2013.