

Queens College, CUNY

Accelerated Graduate Degree Option

Admissions Form

Date: _____

Student Name: _____

ID Number _____

Address: _____

Phone: _____

E-Mail: _____

Undergraduate Major: _____

Credits Completed: _____

Cumulative GPA: _____

Credits in Major Completed: _____

Major GPA: _____

Intended Graduate Program: _____

Graduate Admission Requirements: (check those applicable)

Letters of Recommendation: ____ Personal Statement: ____ Writing Sample: ____

Interview: ____ Other (please specify): _____

Undergraduate Advisor Approval: _____

Graduate Director Approval: _____

Graduate Dean Approval: _____

Office Use Only:

Registrar:

Graduate Admissions: