**SUNY CANTON CORRECTIONS ACADEMY APPLICATION**

A SUNY Canton Corrections Academy Application must be submitted and approved AND enrollment in and payment of JUST 431, Culminating Experience in Corrections must be made prior to the scheduled first day of the academy.

Name:       ID # (College ID):     -    -      Date of Birth:    -    -

Home Address:

City:       State:    Zip:

Gender: Male [ ]  Female [ ]  USA Citizen: Yes [ ]  No [ ]  Cell Phone:     -     -

Email:       @

Ethnic Code (optional):

White/Non-Hispanic [ ]

Black/Non-Hispanic [ ]

Asian/Pacific Islander [ ]

American Indian/Alaskan [ ]

Other: [ ]

Have you ever been convicted of a felony: Yes [ ]  No [ ]

The SUNY Canton Corrections Academy requires a minimum 3.0 GPA for enrollment. According to NYS guidelines you must be at least 18 years old at the time of academy participation.

College:

Major:       Degree Type: Bachelors [ ]  Associates [ ]  Certificate [ ]

Credits Earned:       GPA:

Have you ever taken a course offered by SUNY Canton? Yes [ ]  No [ ]

If so, year and semester:

Have you ever been dismissed from college for disciplinary reasons? Yes [ ]  No [ ]

Dorm accommodations at Kennedy Hall Suites are available during the summer academy session and can be arranged by contacting the SUNY Canton Residential Life Office at (315) 386-7513.

Do you need to live on-campus during the academy: Yes [ ]  No [ ]

Do you plan on enrolling in additional online classes during the academy: Yes [ ]  No [ ]

The academy will be held during the SUNY Canton summer term session II and online credit bearing classes relating specifically to corrections and/or other criminal justice related fields will also be available for an additional cost.

Signature of Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Preliminary Approval (SUNY Canton Criminal Justice Department Chair)

Signature of Department Chair: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Official Approval (St. Lawrence County Sheriff’s Department Academy Director)

Academy Director: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_