

GCC Alternative Transfer Pathways Program Application

If you have a physical, psychosocial, medical or learning disability that may impact your ability to complete this form, please contact Kristen Hargrave, G213 in the Student Success Center, transfer@genesee.edu or 585-345-6805 for assistance.

*Interested candidates must complete all fields; information will be shared with transfer institution.

Personal Information

Name: _____ Date of Birth: _____

Street Address: _____ City: _____

State/Zip Code: _____ Telephone: _____

GCC Email: _____ Student ID _____

Telephone: _____ GCC Email: _____

GCC Information

Current Major: _____

Transfer Institution Information

Please indicate ONE college you wish to attend and the Bachelor's degree you wish to earn.

A complete list of programs/institutions can be found online at:

<https://www.genesee.edu/home/offices/transfer/transfer-information/dual-admission-programs/>

College: _____ Intended Start Term: _____

Major: _____

Signature

Please consider me as a candidate for participation in this alternative transfer program. I understand that acceptance into this program will result in the sharing of my academic records between institutions. I understand that I must maintain a minimum GPA dependent upon the transfer institution and major I enroll in and it is my responsibility to seek advisement with the GCC Transfer Coordinator and the transfer schools admissions representative when on campus, to ensure I am meeting all requirements.

Signature: _____ Date: _____

Return Information:

Please return this form prior to the first day of the upcoming semester for consideration. This form can be emailed to transfer@genesee.edu or mailed to: Genesee Community College, One College Road, Batavia, NY 14020. Attention: Kristen Hargrave