



Clean Technologies and Sustainable Industries Early College High School Program

Hudson Valley Community College, 80 Vandenburg Avenue, Troy, NY 12180-6096 (518) 629-4574 www.hvcc.edu

Student Record Information (SRI Form)

Social Security Number* _____

Name* _____
Last First MI

*HVCC is required by federal law/regulations to collect your social security number (SSN) or correct individual taxpayer identification number (ITIN) to file information returns with the IRS and to furnish a statement to you. In addition, your name on file with the College must match your name as filed with the Social Security Administration. PENALTY: if you fail to furnish your correct SSN or ITIN to the College, you may be subject to a penalty levied by the IRS.

Mailing Address _____

City _____ State _____ Zip Code _____

Personal E-Mail _____ (Check here for change of address)

Cell Phone _____ Home Phone _____

*Sex Code: M OR F Date of Birth: _____

Did you attend Hudson Valley Community College prior to 1971? [] Yes [] No

Are you or have you ever been a service member of the United States military? [] Yes [] No

Are you the family member of someone who served in the active United States military Armed Forces? [] Yes [] No

As required by SUNY System, all students must answer the following two questions:

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

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

*Are you Hispanic/Latino? [] No [] Yes

If yes, what is your background? (select one) [] Central American [] Dominican [] Mexican [] Puerto Rican
[] South American [] Other/Hispanic/Latino

*All students, please indicate your race: (select one or more) [] American Indian or Alaskan Native [] Asian
[] Black or African American [] Native Hawaiian or Other Pacific Islander [] White [] Two or More Races
[] Unknown

*NOTE: Hudson Valley Community College is required to furnish New York State with gender and ethnic data for every student.

Semester/Year: **Fall 2018**

What is your Home High School? _____

CRN	Subject	Course #	Section #	Course Title	# of Credits

I hereby give permission to Hudson Valley Community College to send my grades to my high school guidance office and the Program Administrator/Official. Final 3/18

Student Signature _____ Date _____ Program Administrator/Official _____ Date _____
Please return to the Registrar's Office, HVCC, 80 Vandenburg Avenue, Troy, NY 12180-6096