

College Unlimited @ SUNY
Potsdam
Office of Admission
44 Pierrepont Ave, Potsdam NY 13676

### College Unlimited @ SUNY Potsdam "CUSP"

CUSP is for high school students who benefit from taking college courses on the SUNY Potsdam campus, before graduating from high school. This program is typically for rising seniors or exceptional juniors who are at least 16 years of age, and have maintained a high school grade point average of 85 or higher.

#### **Application Submission Materials:**

### STEP I - Apply to the campus

1. Apply to the campus using the SUNY or Common Application

For the SUNY App\* be sure to use the following:

- Student Type (Q. 28): Freshman
- Type of Study (Q. 30): Full-time
- Page A5 Section A

State University Campus Name: Potsdam

Campus Code: 45

Curriculum Code: \*PROGRAM OF YOUR CHOICE\*
Curriculum Name: \*PROGRAM OF YOUR CHOICE\*

- \* Make sure to also complete the SUNY Supplemental Form required by the campus
- 2. Pay your application fee, \$50. Applications are not forwarded to the campus until paid
- 3. Have high school submit transcripts to Office of Admission
- 4. Submit letters of recommendation to Office of Admission

#### STEP II- Apply to the CUSP Program

5. Complete CUSP Application & Completion Plan and submit the application via:

**Mail:** Office of Admission

SUNY Potsdam 44 Pierrepont Ave Potsdam, NY 13676

**Fax:** (315) 267-2163

**Drop Off:** Office of Admission, 120 Raymond Hall

The Office of Admission will review your completed application and contact you with a decision. Acceptance into the CUSP program will also be communicated by the Office of Admission. We will work with you to develop a schedule of courses that fulfills remaining graduation requirements within the timeline you have indicated and is agreeable by your high school, if applicable.

If you have questions regarding College Unlimited @ SUNY Potsdam please contact the Office of Admission at (315) 267-2180, or visit www.potsdam.edu/earlycollege.



## College Unlimited @ SUNY Potsdam

Office of Admission

44 Pierrepont Ave, Potsdam NY 13676 Phone: (315) 267-2180, Fax: (315) 267-2163

# **CUSP Program Application & Completion Plan**

# **SECTION I - To Be Completed by the Applicant:**

Last Name	First Name		Middle Initial
Mailing Address		City	
State/ProvinceZip	E-mail Address		
Home Phone	Cell Phone	Date of Birth	
High School Name and Location:	3		
Scheduled HS Graduation Date (	Month/Year):		
Planning to take any courses over	r the Summer? If yes, please list:		
Have you previously earned cree	dits from SUNY Potsdam: No _	Yes If yes, Pr	# (if known):
Have you earned credits from ano	ther college? If yes, please list scho	ol name(s):	
College Major/Area of Interest: _		Do you plan to live o	on campus? No Yes
Desired CUSP Enrollment Terms	: Fall 20 Anticipated Con	npletion of HS Grad. Reqs.: (Select One Choice)	
<b>Date SUNY/Common Application</b>	Submitted (Required):		After Spring Semester
All applicants must sign her	е		
	t be processed if it has not been complet rmation submitted is therefore true to th Potsdam by the Office of Admission.		
Student Signature			_ Date
Parent Signature			
In order to facilitate appropriate schedu	I by Appropriate School Office ling of courses needed to fulfill high schouding requirements remaining after the otance by the high school.	ol graduation requirements by t	
Remaining High School Grad	duation Requirements:		
School Acknowledgement o	of Application & Requiremen	nts	
Guidance Counselor Signature	Print Name	Date	Phone#/Email